

P96000050484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700023189577

09/25/03--01034--010 **43.75

FILED
03 SEP 25 AM 11:36
CLERK OF STATE
TALLAHASSEE, FLORIDA

P96000050484
360 Vol Diss Admin Diss Corp 0
9-25-03
*C. [Signature]

MOS INC.
c/o Dr. Victor J. Drobnic
1646-1 Colonial Blvd.
Ft Myers, FL 33907
Tel. (239) 936 -2911

September 22, 2003

Division of Corporations
Amendment Section
PO Box 6327
Tallahassee, FL 32314

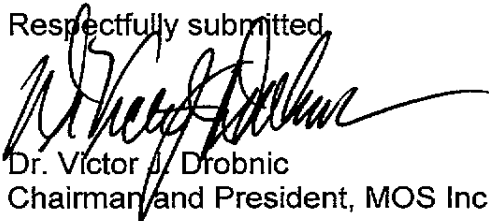
Re: MOS Inc. Document # P96000050484

Dear Sir or Madam:

Find enclosed:

1. Articles of Dissolution
2. Check for \$43.75 (\$35.00 Dissolution Fee, \$8.75 Certified Copy Fee)

Respectfully submitted,



Dr. Victor J. Drobnic
Chairman and President, MOS Inc.

Enclosures

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation is: _____

MUSCULOSKELETAL DIAGNOSTIC SONOGRAPHY INC

SECOND: The date dissolution was authorized: 12/31/02

THIRD: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by vote of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 22 day of Sept 03, _____

Signature 
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Dr VICTOR S. DROBNIAC
(Typed or printed name)

CHAIRMAN OF BOARD

(Title)

03 SEP 25 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED