

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90064 012 ***150.00

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1. Entity Name

R S IMAGING SERVICES, P.A.



Principal Place of Business

1100 NE 163RD ST
102
NORTH MIAMI BEACH FL 33162

Mailing Address

1100 NE 163RD ST
102
NORTH MIAMI BEACH FL 33162

20022589



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

995 N Miami Beach Blvd
Suite, Apt. #, etc.
114

3. Mailing Address

same
Suite, Apt. #, etc.

City & State

NMB FL

City & State

same

4. FEI Number

65-0707832

Applied For

Not Applicable

Zip

33162

Country

USA

Zip

same

Country

same

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STONE, RICHARD W
1100 NE 163RD ST
102
NORTH MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name Stone, Richard W
Street Address (P.O. Box Number is Not Acceptable)
995 N Miami Beach Blvd
114
City N Miami Beach FL Zip Code 33162

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Richard Stone

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME STONE, RICHARD W
STREET ADDRESS 1100 NE 163RD ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME Stone, Richard W
STREET ADDRESS 995 N Miami Beach Blvd # 114
CITY-ST-ZIP NMB FL 33162

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard Stone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/05

Date

(305) 945-1580

Daytime Phone #