FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra R. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000021633 (7)

EXECUTIVE IMAGING SERVICES, INC.

359 NW 36TH AVENUE DEERFIELD BEACH FL 33442 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/10/1997 2. Principal Place of Business 2a. Mailing Address 4, FEI Number	
3. Date Incorporated or Qualified 03/10/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	
	Applied For
21 126	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	Not Applicable
5. Certificate of Status Desired Fee	Additional Required
	O May Be
Zip Country Zip Country 8. This corporation owes or has paid the current year	
26 29 30 Personal Property Tax due June 30. Yes	No No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
Teel Manager	
FLIPPO, ROBERT S	
359 NW 36TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable)	
DEERFIELD BEACH FL 33442	
84 City 85 Z	p Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing	
SIGNATURE Signature, typed or profiled name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE	
12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITLE DELETE 1.1 TITLE P	e 🔀 Additio
NAME ROBERT S. Flippo	
NAME 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS 359 NW 36th Avenue	
CITY-ST-ZIP Deerfield Beach FL 33442	
TITLE DELETE 2.11TILE V.P	e 🔀 Additio
TITLE DELETE 2.1 TITLE V P	
TITLE DELETE 2.1 TITLE VP Change	
NAME 22 NAME 22 NAME Consider E. Colistro 23 STREET ADDRESS 10721 London St.	
NAME 22 NAME 23 STREET ADDRESS 10721 London St.	
NAME 22 NAME 23 STREET ADDRESS 10721 London St.	e 🔲 Additio
NAME STREET ADDRESS S	e Additio
NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELETE 32 NAME COOPER C. CALISTRO COOPER C. CALISTRO CALISTRO CALISTRO CALISTRO CALISTRO COOPER C. CALISTRO	e Additio
NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS	e Additio
NAME STREET ADDRESS CITY-ST-ZIP DELETE 3.1 TITLE DELETE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	
NAME	
NAME	
NAME	
NAME	e [_] Additio

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.1 TITLE 6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME STREET ADDRESS

Robertspr

Robert 5.

DELETE

Fliano

4/27/98

561739 3946

Change

Addition

FILED

May 07 1998 8:00am

Secretary of State