

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000100883

1. Entity Name

IMAGING NETWORK COMPANY

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90208 006 ***150.00

Principal Place of Business

4061 S.W. 47TH AVE.
FT. LAUDERDALE FL 33314

Mailing Address

4061 S.W. 47TH AVE.
FT. LAUDERDALE FL 33314

2. Principal Place of Business

6191 ORANGE DRIVE

3. Mailing Address

6191 ORANGE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DAVIE, FL

City & State

DAVIE, FL

4. FEI Number

65-0797687

Applied For

Not Applicable

Zip

Country

Zip

Country

33314

33314

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPRING, MARC

4061 S.W. 47TH AVE.

FT. LAUDERDALE FL 33314

Name

SPRING, MARC

Street Address (P.O. Box Number is Not Acceptable)

6191 ORANGE DRIVE

City

DAVIE

FL

Zip Code

33314

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

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FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
SPRING, MARC
4061 S.W. 47TH AVE.
FT. LAUDERDALE FL 33314

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
SPRING, MARC
6191 SW 47TH AVE
FT. LAUDERDALE, FL 33314

☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marc Spring

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/01 954-987-5206

Date

Daytime Phone #

CR2E034 (10/00)