

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2003 8:00 am**  
**Secretary of State**

08-04-2003 90153 050 \*\*\*150.00

DOCUMENT # P98000009621

1. Entity Name  
NAVIX MSO PIEDMONT, INC.



Principal Place of Business  
2601 SOUTH BAYSHORE DRIVE SUITE 500  
COCONUT GROVE FL 33133

Mailing Address  
2601 SOUTH BAYSHORE DRIVE SUITE 500  
COCONUT GROVE FL 33133

2. Principal Place of Business  
100 Myles Standish Blvd  
Suite, Apt. #, etc.

3. Mailing Address  
100 Myles Standish Blvd  
Suite, Apt. #, etc.

City & State  
Taunton, MA

City & State  
Taunton, MA

4. FEI Number 65-0834664

Applied For  
Not Applicable

Zip 02780 Country USA

Zip 02780 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

TAYLOR, LANCE  
NAVIX RADIOLOGY SYSTEMS, INC.  
2601 S. BAYSHORE DR., SUITE 500  
COCONUT GROVE FL 33133

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE D  
NAME GILMAN, MILES E  
STREET ADDRESS 2601 S BAYSHORE DR STE 500  
CITY-ST-ZIP COCONUT GROVE FL 33133 ☒ Delete

TITLE T  
NAME TAYLOR, LANCE  
STREET ADDRESS 2001 S. BAYSHORE DR STE 500  
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE S  
NAME Clyde Thayer  
STREET ADDRESS 100 Myles Standish Blvd  
CITY-ST-ZIP Taunton, MA 02780 ☐ Change ☒ Addition

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

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

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

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: Clyde Thayer **SIGNATURE REQUIRED** Clyde Thayer 7/31/03 508-880-3700

CR2E034 (4/03)

*attachment*

**Navix MSO Piedmont, Inc**

100 Myles Standish Blvd  
Taunton, MA 02780

80135961  
~~#P98000009621~~

July 31, 2003

Division of Corporations  
Uniform Business Reports Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

**RE: Document # P98000009621**

Dear Sir or Madam:

Please accept this request to waive the late filing fee for our annual report. The Corporation has changed both officers and addresses and the original report was not received.

Sincerely,

*Clyde Thayer*

Clyde Thayer  
Secretary