2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000018035

Entity Name
EDICAL SPECIALTIES & DIAGNOSTIC SERVICES IN
EERFIELD BEACH, INC.

FILED
01 SEP 25 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1851 West Hillsboro Blvd. Deerfield Beach, FL 33442	

2. Principal Place of Business	3. Mailing Address
1851 West Hillsboro Blvd.	110 Marcus Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Deerfield Beach, FL	City & State: Melville, NY
Zip: 33442 Country:	Zip: 11747 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number — Applied For / Not Applicable (X)

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
Corporation Service Company 1201 Hayes Street Tallahassee, FL 32301	Name: Broad & Cassel Attn: Gabe Imperato, Esq. Street Address (P.O. Box Number is Not Acceptable): Broward Financial Center 500 East Broward Blvd., Suite 1130 City: Ft. Lauderdale FL Zip Code: 33394

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] Esq. 7/17/01
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) ☐

FILE NOW! TAX 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. ☐ **$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,S,D ,T Raymond V. Damadian 110 Marcus Drive Melville, NY 11747 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 000004621180--1 -10/03/01--01021--026 ****550.00 ****550.00
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CR2E034 (11/00)

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: Raymond V. Damadian Pres Raymond V. Damadian 9/19/01 (631) 694-2929
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE