

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 98000029949

1. Entity Name
ADVANCED IMAGING SERVICES, INC.

Principal Place of Business Mailing Address
475 Bitmore Way
Suite # 302
Coral Gables, Florida 33134

2. Principal Place of Business
475 Bilmore Way

Suite, Apt. #, etc.
302

City & State
Coral Gables Florida

Zip
33134

Country
U.S.A.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 DEC 19 PM 4:31

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0825210

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GRISEL CARVAJAL
2507 West 70th Street
Hialeah, Florida 33016

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.

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)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President- Secretary
Grisel Carvajal
2507 West 70th Street
Hialeah, Florida 33016 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
900004745039-1
-12/31/01--01064--003
****150.00 ****150.00 ☐ Change ☐ Addition

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

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

TITLE
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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

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:

Grisel Carvajal

President

12/31/01

CR2E034 (5/01)

Exposito & Associates, Inc.
Accountants

Noel R. Puig
Magali E. Puig

Suite 428
LeJeune Centre
782 N.W. LeJeune Road
Miami, Florida 33126

Telephone (305) 442-8093
Telefax (305) 448-4391

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: **Advance Imaging Service Inc.**
Document # P98000029949
475 Biltmore Way
Suite # 302
Coral Gables, Florida 33134

Gentlemen :

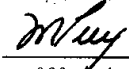
We are respectfully requesting to abate the reinstatement fee of \$ 750.00 since we never receive the annual report.

Enclose please find annual report for the year 2001 and a check in the amount of \$ 150.00 to pay for the report, we are also making a change of address for the corporation, since we do not receive correspondence at that address.

Thanking you for your help and cooperation in this matter.

Cordially,

Exposito & Associates, Inc.



Magali L. Puig