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Secretary of State

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**PROFIT
 CORPORATION
 ANNUAL REPORT
 1999**



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000060764V

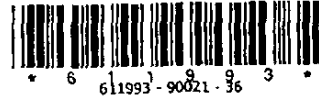
1. Corporation Name

First Florida Imaging

Principal Place of Business

Mailing Address

101 NW 1st Avenue
 Delray Beach, FL 33444



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

7/9/98

2. Principal Place of Business

2a. Mailing Address

21 101 NW 1st Ave

26 1900 Glades Rd

4. FEI Number

605-0875005

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

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

23 Delray Beach, FL

28 Boca Raton, FL

Zip Country

Zip Country

8. This corporation owes the current year Intangible
Personal Property Tax.☐ Yes ☐ No

24 33444 25 USA

29 33431 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PPMS
 1900 Glades Rd #102
 Boca Raton, FL 33431

81 Name

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

83

84 City

FL

85 Zip 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 its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

Signature (Typed or Printed Name of Registered Agent and Date if Applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

8/26/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME Director
 STREET ADDRESS James Zeich
 CITY-ST-ZIP 101 NW 1st Ave
 Delray Beach, FL 33444

1.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME Director
 STREET ADDRESS Gary Brown
 CITY-ST-ZIP 1900 Glades Rd #102
 Boca Raton, FL 33431

2.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/99

Date

501-3912339

Daytime Phone #

CR2E034 (11/98)