## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## May 01, 2008 8:00 am Secretary of State DOCUMENT # P99000051937 MILLENNIUM IMAGING, INC. 05-01-2008 90234 050 \*\*\*150 00 Principal Place of Business Mailing Address 10910 STATE RD 70 E 10910 STATE RD 70 E SUITE 103 STE 103 BRADENTON, FL 34202 BRADENTON, FL 34202 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 04282008 Chg-P City & State City & State 4. FEI Number Applied For 65-0927729 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LIPKIN, ROBERT ESQ Street Address (P.O. Box Number is Not Acceptable) 537 10TH STREET W BRADENTON, FL 34205 City 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 Signature, typed or printed name of registered agent and site if applicable 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DS ☐ Delete TITLE ☐ Change X Addition TITLE FRENCH, ERIC 4816 2ND AVE DR NW HERBST, MARK NAME NAME STREET ADDRESS 7118 8TH STREET S. STREET ADDRESS BRADENTON FL 34209 ST. PETERSBURG, FL 33705 CITY-ST-7iP CITY-ST-ZIP ☐ Delete K Change ■ Addition TITLE TITLE D AUCAR, ALFRED NAME AUCAR, ALFRED NAME 87TH ST NW 2405 STREET ADDRESS 10910 STATE RD 70 E STE 103 STREET ADDRESS 34209 CITY - ST - ZIP BRADENTON CITY - ST - ZIP BRADENTON, FL 34202 Addition TITLE Delete **TITLE** Change AUCOIN, GARFIELD NAME NAME STREET ADDRESS 4803 29TH AVENUE DRIVE W STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-ZIP Delete ☐ Change ■ Addition TITLE TITLE CAGNINA, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 1771 MANATEE AVENUE W CITY-ST-ZIP BRADENTON, FL 34205 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE D NAME LASSEN, KEITH NAME STREET ADDRESS 4401 LAJOLLA DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 34210 ☐ Change ☐ Delete TITLE Addition TITLE OREGON, LARRY NAME STREET ADDRESS 1450 ARCHER STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP LEHIGH ACRES, FL 33972

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

AME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED**