

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S28326

FILED
Oct 21, 2004
Secretary of State

Entity Name: MEDICAL IMAGING ENGINEERING, INC.

Current Principal Place of Business:

7321 NW 35TH ST
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

7321 NW 35TH ST
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELLO, JOSE A.
7321 NW 34TH ST.
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DURANZA, CARLOS
Address: 7321 NW 35TH ST
City-St-Zip: MIAMI, FL 33122

Title: S () Delete
Name: BELLO, JOSE A
Address: 7321 NW 35TH ST
City-St-Zip: MIAMI, FL 33122

Title: T () Delete
Name: SUAREZ, RAFAEL
Address: 7321 NW 35TH ST
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAEL SUAREZ

T

10/21/2004

Electronic Signature of Signing Officer or Director

Date