## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

1286 W. NEWPORT CENTER DR.

DEERFIELD BEACH FL 33442-7711

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **S67332**

Corporation Name

Principal Place of Business

1286 NEWPORT CENTER DR

DEERFIELD BEACH FL 33442

SURGICAL IMAGE LABORATORIES, INC.

Principal Place of Gusiness   2a, Mailing Address   65-0275864   Not Applicable   Saite, Apt. #, etc.   25   Soite, Apt. #, etc.   27   Soite, Apt. #, etc.   28   Soite, Apt. #, etc.   27   Soite, Apt. #, etc.   28   Soite, Apt. #, etc.   27   Soite, Apt. #, etc.   28   Soite, Apt. #, etc.		••			٠		3. Date Incorporated or Qualified 07/17/1991		
Suite, Apt. #, etc.  Suite, Ap	-		- No	iling Address	<del></del>			Appl	ied For .
Suite, Apt. #, etc.   25   Suite, Apt. #, etc.   27   Suite, Apt. #, etc.   28   Chy & State   Chy & St	Principal Pla	ace of Business	<del>├-</del> ¬	illing Address			I	Not	Applicable
South, Apt. #, etc.    South, Apt. #, etc.	·[					<del></del>			
City & State	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	•		
Cary As State  Zip	2		27					<del></del>	
Zip	City & State City & State						1 -	T	-
9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent WOUSKY, AMY S. 2300 GLADES RD 9. SUITE 307 E BOCA RATON FL 33433 FL. Pursuant to the provisions of Sections 607 6502 and 607,1508, Florids 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, and familiar with, and accept the obligations of, Section 807,0505, Florida Statutes.  SIGNATURE Signature, type in printed name of registered agent see that is speciable.  OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  22. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13 STREET ADDRESS  DITY ST. 2P  STANKO, LEE 2 STANKO, LEE 2 STANKO, LEE 2 STANKO, LEE 2 STANKO, LEE 3 STANKO, LEE 3 STANKO, LEE 3 STREET ADDRESS 2 STANKO, LEE 3 STANKO, LEE 4 STANKO 3 STREET ADDRESS  CITY ST. 2P  DELETE 4 STITUE 4 Change Addition  NUME 5 STANKO, LEE 5 STANKO 5 S	3	•	28						Fees
9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. SulTE 307 E 14. 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, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent	7)	Country	Zip	)	Country		8. This corporation owes the current year Into	angible	_ : 1
9, Name and Address of Current Registered Agent 9, Name and Address of New Registered Agent 90, Name and Address of New Registered Agent 90, Name and Address of New Registered Agent 91, Parsuant to the provisions of Sections 607.6502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporations of Sections 607.6502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I havely accept the objections of, Section 97.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I havely accept the objections of, Section 97.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent and statement for the purpose of changing its registered of corporation's board of directors. I havely accept the objection of the purpose of changing its registered by the corporation's board of directors. I havely accept the objection of the purpose of changing its registered by the corporation's board of directors. I havely accept the objection of the purpose of the companies of the purpose of the collections. I have a purpose of the companies of the purpose of the objection of the purpose of the objection of the purpose of the objection of the purpose of	7		20	30	0		Personal Property Tax.	☐ Yes L	_No
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2300 GLADES RD  **SUITE 307 E BOCA RATION FL 33433  **E BOCA RATION FL 33436  **I BOCA RATION FL 34436  **I BOCA RATION FL		9. Name and Address of Curren	t ivediatere	- Agent	81	Name			i
2300 GLADES RD  **SUITE 307 E BOCA RATION FL 33433  **E BOCA RATION FL 33436  **I BOCA RATION FL 34436  **I BOCA RATION FL		OLV AND C							
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14.   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 a seguent, 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 a seguent, and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE	Y SUIT	E 307 E			83				
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14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Fibrial statements, representations and applied and accurate and that my signature shall have the same legal effect as if made under oath; that I am an	CITY-ST-ZIP	<u> </u>				Aire sasanin	Section 110 07(3)(i) Florida Statutos I further re	ertify that the i	nformation
	14. I hereby	certify that the information supplied w	ith this filing	g does not qualify for i	tne exemp ate and th	nion stated in at mv signatu	re shall have the same legal effect as if made und	der oath; that	l am an

4. 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 copporation 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

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/04/98 (954) 480 - 8323

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

DO NOT WRITE IN THIS SPACE .

01-25-1999 90025 003 \*\*\*150.00