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PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S86893

MEDICAL ARTS RADIOLOGY, INC.

(2)

FILED
Apr 24 1997 8:00am
Secretary of State

Principal Place 1905 OAK STR MELBOURNE F US	EET	Mailing Address 1305 OAK STREET MELBOURNE FL 32801-31 US	1905 OAK STREET MELBOURNE FL 32901-3110			
					3. Date Incorporated or Qualified 10/11/1991	3a. Date of Last Report 04/26/1996
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-3088857	Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	28	Countr	у	B. This corporation has liability for i	
4	9, Name and Address of Curre	29 Anni	30		Florida Statutes	
		it negistored waatt	8.	I Name	IV. Hame and Address of New Ap	Alereien wäeiir
1305	IRLES W PATTISON VPD I OAK ST BOURNE FL 32901				dress (P.O. Box Number is Not Acceptable)	
			84	City		FL 85 Zip Code
agent. I a SIGNATURE	Signature, better of purities restricted to			•	poration submits this statement for the principal board of directors. I hereby accepted when ideataing) ADDITIONS/CHANGES TO OFFICE	L)ATE
TITLE NAME	PD LAUFER, FREDERICK	DELETE	1.1 TITLE 1.2 NAME			Change Addition
TREET ADORESS	1305 OAK STREET		4	T ADDRESS		
	1305 OAK STREET MELBOURNE FL 32901		1.3 STREE	T ADDRESS		
ITY-ST-ZIP		DELETE	4	T ADDRESS		Change Addition
ity-\$t-zip Itle Ame	MELBOURNE FL 32901 VD PATTISON, CHARLES W	DELETE	1.3 STREE 1.4 CITY- 2.1 TILLE 2.2 NAME	T ADDRESS S1-ZIP		Change Addition
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ity-\$t-zip Itle Iame Treet address Ity-\$t-zip	MELBOURNE FL 32901 VD PATTISON, CHARLES W 1305 OAK STREET MELBOURNE FL 32901 TD	DELETE	1.3 STREE 1.4 CITY- 2.1 TILLE 2.2 NAME 2.3 STREE	T ADDRESS S1-ZIP T ADDRESS -S1-ZIP		☐ Change ☐ Addition
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Immination included 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 eath; 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.

SIGNATURE:

07-723-6078