

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 118363
1. Corporation Name: **CORAL Gables MRI, Inc.**

Principal Place of Business Mailing Address

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	747 Ponce de Leon Blvd	26	747 Ponce de Leon Blvd.	02-27-92	04-04-95
22	Suite, Apt. #, etc. 100	27	Suite, Apt. #, etc. 100	4. FET Number	Applied For
23	City & State CORAL GABLES, FL	28	City & State CORAL GABLES, FL	65-0334496	Not Applicable
24	Zip 33134	29	Zip 33134	5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
25	County Dade	30	County DADE	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
BRACERAS WILFRED 1200 Ponce de Leon Blvd. CORAL GABLES, FL. 33134				81 Name	BRACERAS WILFRED
				82 Street Address (P.O. Box Number is Not Acceptable)	600 W 20 STREET
				83	
				84 City	MIAMI
				85 State	FL
				86 Zip Code	33010

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 607.0505, Florida Statutes.

SIGNATURE: *Wilfred Braceras* DATE: 04/30/96

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CP.	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME	BRACERAS WILFRED		2. NAME				
STREET ADDRESS	1200 Ponce de Leon Blvd.		3. STREET ADDRESS				
CITY-ST-ZIP	CORAL GABLES, FL. 33134		4. CITY-ST-ZIP				
TITLE	DT: MOURANY MUKIBIL H	<input type="checkbox"/> DELETE	21. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			22. NAME				
STREET ADDRESS	1200 Ponce de Leon Blvd.		23. STREET ADDRESS				
CITY-ST-ZIP	CORAL GABLES, FL. 33134		24. CITY-ST-ZIP				
TITLE	DV: DIAZ ROSENDO	<input type="checkbox"/> DELETE	31. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			32. NAME				
STREET ADDRESS	1200 Ponce de Leon Blvd.		33. STREET ADDRESS				
CITY-ST-ZIP	CORAL GABLES, FL. 33134		34. CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	41. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			42. NAME				
STREET ADDRESS			43. STREET ADDRESS				
CITY-ST-ZIP			44. CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	51. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			52. NAME				
STREET ADDRESS			53. STREET ADDRESS				
CITY-ST-ZIP			54. CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	61. TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition		
NAME			62. NAME				
STREET ADDRESS			63. STREET ADDRESS				
CITY-ST-ZIP			64. CITY-ST-ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address

SIGNATURE: *Wilfred Braceras* DATE: 04/30/96

CR2E034 (12/95)