

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

PROFIT CORPORATION ANNUAL REPORT



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

1996 5-1-96

DOCUMENT # **V46932 (2)**

1. Corporation Name
DADE MOBILE X-RAY, INC.



Principal Place of Business: 12101 NW 98TH AVE, BAY 9, HIALEAH GARDENS FL 33016 US
Mailing Address: 12101 NW 98TH AVE, BAY 9, HIALEAH GARDENS FL 33016 US

3. Date Incorporated or Qualified: **06/23/1992**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: **65-0342038**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**DIGGS, STEVEN H.
12101 NW 98 AVE
BAY 9
HIALEAH GARDENS FL 33016**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

11. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature typed or printed name of registered agent in Block 9 applicable. (NOTE: Registered Agent signature required when non-state agent.)

12. OFFICERS AND DIRECTORS

TITLE	TS	<input type="checkbox"/> DELETE
NAME	DIGGS, STEVEN H	
STREET ADDRESS	755 EAST 49 ST.	
CITY - ST - ZIP	HIALEAH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/T	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Steven H. Diggs	
1.3 STREET ADDRESS	12101 NW 98 Ave. Bay #9	
1.4 CITY - ST - ZIP	Hialeah Gardens, FL 33016	
2.1 TITLE	VP/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Ulee Major	
2.3 STREET ADDRESS	12101 NW 98 Ave. Bay #9	
2.4 CITY - ST - ZIP	Hialeah Gardens, FL 33016	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 if changed, or on an attachment with an address.

SIGNATURE: Steven H. Diggs Steven H. Diggs 4/26/96 305-557-7748
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date of Filing

CR2E034 (12/95)