2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V72790

Entity Name: VIVRA HEART SERVICES OF BOCA RATON, INC.

FILED Jan 06, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

533 AIRPORT BLVD., STE. 400 533 AIRPORT BLVD. BURLINGAME, CA 94010 STE. 400

BURLINGAME, CA 94010

Current Mailing Address: New Mailing Address:

533 AIRPORT BLVD., STE. 400 533 AIRPORT BLVD. BURLINGAME, CA 94010 5TE. 400

BURLINGAME, CA 94010

FEI Number: 65-0363497 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301 US

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:

Title:

Name:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete Title: D/P (X) Change () Addition WILLIAMS, JAMES B

Address: 533 AIRPORT RIVE STE 400

Address: 533 AIRPORT BLVD., STE. 400 Address: 533 AIRPORT BLVD., STE. 400 City-St-Zip: BURLINGAME, CA 94010 City-St-Zip: BURLINGAME, CA 94010

Title: VPS () Delete Title: S/T (X) Change () Addition

Name:LEWIN, HOWARDName:TUMBARELLO, STEVEAddress:533 AIRPORT BLVD., STE. 400Address:533 AIRPORT BLVD., STE. 400City-St-Zip:BURLINGAME, CA 94010City-St-Zip:BURLINGAME, CA 94010

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: STEVE TUMBARELLO S/T 01/06/2003