

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000108032

**Entity Name:** HOMESTEAD PORTABLE X-RAY SERVICES, INC.

**FILED**  
**May 01, 2013**  
**Secretary of State**  
**CC5821559310**

**Current Principal Place of Business:**

4700 N.W. 7TH STREET  
SUITE 3  
MIAMI, FL 33126

**Current Mailing Address:**

4700 N.W. 7TH STREET  
SUITE 3  
MIAMI, FL 33126

**FEI Number: 65-1058724**

**Certificate of Status Desired: No**

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

HERRERA-ORTEGA, KAADIR  
4700 N.W. 7TH STREET  
SUITE 3  
MIAMI, FL 33126 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PST  
Name HERRERA-ORTEGA, KAADIR  
Address 4700 N.W. 7TH STREET  
City-State-Zip: MIAMI FL 33126

*I hereby 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 all other like empowered.*

**SIGNATURE: KAADIR HERRERA-ORTEGA**

**PRESIDENT**

**05/01/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date