

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000037050

Entity Name: MEDICAL ADVANCED GROUP IMAGING CONSULTANTS, PLLC

Current Principal Place of Business:

310 NW 21ST ST
BOCA RATON, FL 33431

Current Mailing Address:

310 NW 21ST ST
BOCA RATON, FL 33431 US

FEI Number: 26-4690705

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EIGLES, STEPHEN
960 NW 4TH CT.
BOCA RATON, FL 33432 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

Authorized Person(s) Detail :

Title CEO
Name EIGLES, STEPHEN BMD
Address 960 NW 4TH CT.
City-State-Zip: BOCA RATON FL 33432

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN EIGLES

MGRM

04/04/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date