

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 825374

FILED  
Jan 21, 2002 8:00 AM  
Secretary of State

Entity Name: KONICA MEDICAL IMAGING, INC.

**Current Principal Place of Business:**

411 NEWARK POMPTON TURNPIKE  
WAYNE, NJ 07470

**New Principal Place of Business:**

**Current Mailing Address:**

411 NEWARK POMPTON TURNPIKE  
WAYNE, NJ 07470

**New Mailing Address:**

FEI Number: 22-1913997

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: SUZUKI, SHIGERU  
Address: 411 NEWARK POMPTON TURNPIKE  
City-St-Zip: WAYNE, NJ 07470

Title: P ( ) Delete  
Name: THOMPSON, WAYNE  
Address: 411 NEWARK POMPTON TURNPIKE  
City-St-Zip: WAYNE, NJ

Title: VT ( ) Delete  
Name: HASEGAWA, TERRY  
Address: 411 NEWARK PANPTON TURNPIKE  
City-St-Zip: WAYNE, NJ 07470

Title: SD ( ) Delete  
Name: WHITESIDE, WILLIAM A JR.  
Address: 2000 MARKET STREET, 10TH FLOOR  
City-St-Zip: PHILADELPHIA, PA 19103

Title: VP (X) Delete  
Name: LEIBOWITZ, JERRY,  
Address: 411 NEWARK POMPTON TURNPKE  
City-St-Zip: WAYNE, NJ

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: THOMPSON, WAYNE  
Address: 411 NEWARK POMPTON TURNPIKE  
City-St-Zip: WAYNE, NJ

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: SCOTT, KEVIN B  
Address: 2000 MARKET STREET, 10TH FLOOR  
City-St-Zip: PHILADELPHIA, PA 19103

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KEVIN B. SCOTT

SD

01/21/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date