

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080771

1. Entity Name
SONO IMAGING, INC.

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90215 030 ***150.00

Principal Place of Business Mailing Address
~~309 3RD WAY~~ ~~WEST PALM BEACH FL 33407~~ ~~309 3RD WAY~~ 1300 N.W. 17th AVE.
1300 N.W. 17th AVE. Suite 180
Suite 180 Delray Beh., FL 33445
Delray Beh., FL 33445

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code
VIRGO, BRETT M 1300 N.W. 17th AVE.
~~309 3RD WAY~~ Suite 180
~~WEST PALM BEACH FL 33407~~ Delray Beh., FL
33445

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	VIRGO, BRETT M		NAME		
STREET ADDRESS	309 3RD WAY		STREET ADDRESS	1300 N.W. 17th AVE. Suite 180	
CITY-ST-ZIP	WEST PALM BEACH FL 33407		CITY-ST-ZIP	Delray Beh., FL 33445	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MORALES-HENDRY, VANESSA I		NAME	VIRGO, VANESSA	
STREET ADDRESS	309 3RD WAY		STREET ADDRESS	1300 N.W. 17th AVE. Suite 180	
CITY-ST-ZIP	WEST PALM BEACH FL 33407		CITY-ST-ZIP	Delray Beh., FL 33445	
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Vanessa Virgo* (561) 272-1331 4-28-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)