

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000108200

FILED
Mar 02, 2012
Secretary of State

Entity Name: OMEGA MEDICAL IMAGING, LLC

Current Principal Place of Business:

675 HICKMAN CIRCLE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

675 HICKMAN CIRCLE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 27-3694578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENTURE MANAGEMENT GROUP, INC
445 WEST DRIVE
SUITE 104
MELBOURNE, FL 32904 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: VENTURE MANAGEMENT GROUP INC
Address: 445 WEST DRIVE SUITE 104
City-St-Zip: MELBOURNE, FL 32904

Title: MGRM
Name: FLEMING, BRIAN
Address: 3328 OAKMONT TERRACE
City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: KIMBERLY BROWN

CFO

03/02/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date