

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16006

FILED
Mar 22, 2010
Secretary of State

Entity Name: ALLIANCE IMAGING NC, INC.

Current Principal Place of Business:

100 BAYVIEW CIRCLE
SUITE 400
NEWPORT BEACH, CA 92660 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6600
NEWPORT BEACH, CA 92658 US

New Mailing Address:

FEI Number: 94-2568732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO
Name: VIVIANO, PAUL S
Address: 100 BAYVIEW CIRCLE, SUITE 400
City-St-Zip: NEWPORT BEACH, CA 92660

Title: GC
Name: GLOVINSKY, ELI H
Address: 100 BAYVIEW CIRCLE, SUITE 400
City-St-Zip: NEWPORT BEACH, CA 92660

Title: CFO
Name: AIHARA, HOWARD K
Address: 100 BAYVIEW CIRCLE, SUITE 400
City-St-Zip: NEWPORT BEACH, CA 92660

Title: CAO
Name: POAN, NICHOLAS A
Address: 100 BAYVIEW CIRCLE, SUITE 400
City-St-Zip: NEWPORT BEACH, CA 92660

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: NICHOLAS A. POAN

CAO

03/22/2010

Electronic Signature of Signing Officer or Director

Date