

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 02, 2008  
Secretary of State**

DOCUMENT# P94000089491

Entity Name: KENDALL-PERRINE DIAGNOSTIC CENTER, INC.

**Current Principal Place of Business:**

9180 WEST BAYHARBOR DR  
3C  
MIAMI, FL 33154 US

**New Principal Place of Business:**

**Current Mailing Address:**

9180 WEST BAYHARBOR DR  
3C  
MIAMI, FL 33154 US

**New Mailing Address:**

FEI Number: 65-0547863      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

POLLEDO, ELISEO L  
8500 SW 8TH STREET  
240  
MIAMI, FL 33144 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: PST ( ) Delete  
Name: MORALES, SONIA  
Address: 9180 WEST BAYHARBOR DR, APT 3C  
City-St-Zip: MIAMI, FL 33154 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SONIA MORALES

PRES

02/02/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date