2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064678

Entity Name: CALIFORNIA CLUB DIAGNOSTIC CENTER, L.L.C.

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

850 IVES DAIRY ROAD, UNIT 14 NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

850 IVES DAIRY ROAD, UNIT 14 NORTH MIAMI BEACH, FL 33179

FEI Number: 22-3936247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

QUALCARE MEDICAL CENTERS, LLC
210 SOUTH FEDERAL HIGHWAY
2ND FLOOR
HOLLYWOOD, FL 33020 US

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.

in the State of Florida.

SIGNATURE: MARK GRNJA, MANAGING MEMBER 04/14/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition
Name: BARONOV ALEXANDER Name: GRNJA MARK

Name: BARONOV, ALEXANDER Name: GRNJA, MARK
Address: 850 IVES DAIRY ROAD, UNIT 14 Address: 210 SOUTH FEDERAL HIGHWAY, 2ND FLOOR

City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: SABYROVA, LANA CHOLPON Name: MCGOOHAN, JOHN J

Address: 850 IVES DAIRY ROAD, UNIT 14 Address: 210 SOUTH FEDERAL HIGHWAY, 2ND FLOOR

City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: HOLLYWOOD, FL 33020

Title: S (X) Delete Title: () Change () Addition

 Name:
 SABYROVA, LÂNA CHOLPON
 Name:

 Address:
 850 IVES DAIRY ROAD, UNIT 14
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33179
 City-St-Zip:

 Name:
 BARONOV, ALEXANDER
 Name:

 Address:
 850 IVES DAIRY ROAD, UNIT 14
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33179
 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 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: MARK GRNJA MGR 04/14/2008