FORT LAUDERDALE, FL 33310			
FEI Number: 59-3682006		Certificate of Status Desired: No	
Name and Address of Current Registered Agent:			
CORPDIRECT 515 EAST PAR TALLAHASSEE			
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.			
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Florida.
The above name SIGNATURE		stered office or regis	tered agent, or both, in the State of Florida.
		stered office or regis	tered agent, or both, in the State of Florida.
	Electronic Signature of Registered Agent	stered office or regis	• • •
SIGNATURE	Electronic Signature of Registered Agent	stered office or regis	• • •
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent		Date
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent CEO	Title	P

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.

CEO

SIGNATURE: HOWARD DEKKERS

Electronic Signature of Signing Officer/Director Detail

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

P O BOX 5084

Entity Name: OAKLAND PARK MRI, INC.

DOCUMENT# P00000107288

Current Principal Place of Business:

1799 W. OAKLAND PARK BLVD., STE 105 FT. LAUDERDALE, FL 33311

FILED Jan 02, 2013 **Secretary of State** CC9258992652

01/02/2013