2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000025464

Entity Name: ADVANCED DIAGNOSTIC IMAGING, INC.

ity Name: ABVANOLD DIAGNOCTIC IMAGING,

Current Principal Place of Business:

2700 UNIVERSITY SQUARE DRIVE TAMPA FL 33612-5513

Current Mailing Address:

ATTN: OMMI ACCTG DEPT

P.O. BOX 30728

TAMPA FL 33630-3728

FEI Number: 59-3705595 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, BHARAT UMD 2700 UNIVERSITY SQUARE DRIVE TAMPA FL 33612-5513 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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Mar 19, 2013

Secretary of State

CC9475167422

Officer/Director Detail:

Title PD Title SD

Name OTERO, RAUL R Name ZAMORE, ROBERT AMD

Address 2700 UNIVERSITY SQUARE DRIVE Address 2700 UNIVERSITY SQUARE DRIVE

City-State-Zip: TAMPA FL 33612-5513 City-State-Zip: TAMPA FL 33612

Title VP Title AT-LARGE D

Name KEDAR, RAJENDRA P Name ANDERSON, SCOTT R

Address 2700 UNIVERSITY SQUARE DRIVE Address 2700 UNIVERSITY SQUARE DR

City-State-Zip: TAMPA FL 33612-5513 City-State-Zip: TAMPA FL 33612

Title AT-LARGE D

Name DAVIS, CLIFFORD

Address 2700 UNIVERSITY SQUARE DRIVE

City-State-Zip: TAMPA FL 33612-5513

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: ROBERT ZAMORE

Electronic Signature of Signing Officer/Director Detail

SECRETARY

03/19/2013