

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000003088

Entity Name: FLORIDA DIAGNOSTIC IMAGING CENTER, INC.

Current Principal Place of Business:

3480 PRESTON RIDGE RD
#600
ALPHARETTA, GA 30005

Current Mailing Address:

3480 PRESTON RIDGE RD
#600
ALPHARETTA, GA 30005

FEI Number: 59-3551727

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Officer/Director Detail :

Title P
Name SCHAEFER, DANIEL
Address 3480 PRESTON RIDGE RD #600
City-State-Zip: ALPHARETTA GA 30005

Title SECR
Name NORMARK, PER B.
Address 3480 PRESTON RIDGE RD
 #600
City-State-Zip: ALPHARETTA GA 30005

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: DANIEL J. SCHAEFER

OFFICER/DIRECTOR

03/07/2016

Electronic Signature of Signing Officer/Director Detail

Date