

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000100377

**Entity Name:** RX IMAGING OF SWFL LLC

**Current Principal Place of Business:**

506 SE 47TH TERRACE  
SUITE A  
CAPE CORAL, FL 33904

**Current Mailing Address:**

506 SE 47TH TERRACE  
SUITE A  
CAPE CORAL, FL 33904

**FEI Number:** 47-1176191

**Certificate of Status Desired:** No

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

FORRESTER HART BELISLE AND WHITAKER PL  
1429 COLONIAL BLVD  
SUITE 201  
FORT MYERS, FL 33907 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

**Authorized Person(s) Detail :**

Title MGR  
Name TANNENBAUM, ALAN  
Address 2090 WEST FIRST STREET #605  
City-State-Zip: FORT MYERS FL 33901

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALAN L. TANNENBAUM

**MGR**

**02/14/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date