2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# 462892

Entity Name: RADIOLOGY ASSOCIATES, P.A. OF FORT LAUDERDALE

Current Principal Place of Business:

902 N.E. 1ST STREET
SUITE 202
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

1853 BANKS ROAD
MARGATE, FL 33063 US

Current Mailing Address:

902 N.E. 1ST STREET
SUITE 202
POMPANO BEACH, FL 33060 US

New Mailing Address:

1853 BANKS ROAD
MARGATE, FL 33063 US

FEI Number: 59-1562872 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUMES, JOHN ESQ.
LAW OFFICE OF JOHN HUME
1401 UNIVERSITY DRIVE, SUITE 402
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MENDEZ, GASTON, JR,
Address: 10010 NW 45TH ST
City-St-Zip: CORAL SPRINGS, FL

Title: D (X) Delete
Name: SIMON, MARK J.,
Address: 2382 NE 29TH ST
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: D (X) Delete
Name: MARTI, ALEX J.,
Address: 7001 VENTURA CT
City-St-Zip: PARKLAND, FL 33067

Title: D (X) Delete
Name: MENDEZ, KEVIN R.,
Address: 2360 S.W. 106 TERRACE
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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 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 an address, with all other like empowered.

SIGNATURE: GASTON MENDEZ, JR. PD 04/30/2008
Electronic Signature of Signing Officer or Director Date