


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 26, 2007 8:00 am**  
**Secretary of State**

03-26-2007 90057 042 \*\*\*150.00

<b>DOCUMENT #491314</b> 1. Entity Name GATEWAY RADIOLOGY CONSULTANTS, P.A.	
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Principal Place of Business 5880 - 49TH STREET NORTH STE 104 ST. PETERSBURG, FL 33709	Mailing Address 5880 - 49TH STREET NORTH STE 104 ST. PETERSBURG, FL 33709
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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City & State  Zip Country	City & State  Zip Country
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40040555



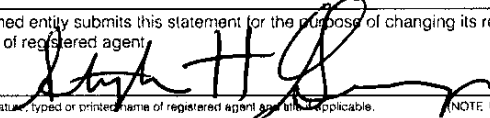
02212007 Chg-P CR2E034 (12/06)

4. FEI Number 59-1634310	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  PEVARSKI, DENNIS J 5880 49TH ST N STE 104 ST PETERSBURG, FL 33709	
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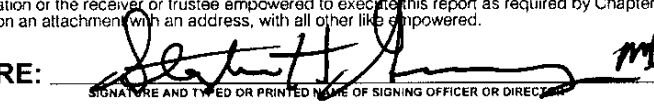
7. Name and Address of New Registered Agent Name STEPHEN H. GREENBERG Street Address (P.O. Box Number is Not Acceptable) 5880 49TH ST. N. STE. 104 City ST PETERSBURG FL Zip Code 33709	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  STEPHEN H. GREENBERG PRESIDENT 3/14/07 DATE: 3/14/07	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D GREENBERG, STEPHEN H 5880 49TH ST N., STE 104 SAINT PETERSBURG, FL 33709 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D PEVARSKI, DENNIS J 5880 49TH ST. N. STE 104 SAINT PETERSBURG, FL 33709 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D HAMEROFF, NATHAN M 5880 49TH ST. N., STE. 104 SAINT PETERSBURG, FL 33709 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/TD ANDERSON, STEPHEN C 5880 49TH ST N., STE 104 SAINT PETERSBURG, FL 33709 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D MANGAT, GAGANDEEP S 5880 49TH ST N., STE 104 SAINT PETERSBURG, FL 33709 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT / DIRECTOR GREENBERG, STEPHEN H. 5880 49TH ST. N., STE. 104 ST. PETERSBURG, FL 33709 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY/TREASURER / DIRECTOR PEVARSKI, DENNIS J. 5880 49TH ST. N., STE. 104 ST. PETERSBURG, FL 33709 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT / DIRECTOR ANDERSON, STEPHEN C. 5880 49TH ST. N., STE. 104 ST. PETERSBURG, FL 33709 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  MD SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	3/14/07 727 5252121 Date Daytime Phone #