2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY 19 AM 10:28

DOCUMENT # A97000002835

1. Entity Name
OPEN MAGNETIC IMAGING OF CORAL SPRINGS, LTD.

Principal Place of Business	Mailing Address
2200 N. COMMERCE PKWY, #100 WESTON, FL 33326	2200 N. COMMERCE PKWY, #100 WESTON, FL 33326

DO NOT WRITE IN THIS SPACE

02152006 No Chg-LP CR2E003 (11/05)

4. FEI Number
65-0606168

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DELGADO, MARIO R ESQ.
2000 PONCE DE LEON BLVD., #102
CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS $500.00
After May 1, 2006, Fee will be $800.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	P97000100119
NAME	UNIVERSITY MRI MANAGEMENT, INC.
STREET ADDRESS	2200 N. COMMERCE PKWY, #100
CITY-ST-ZIP	WESTON, FL 33326
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05/31/06--01030--007 **1800.00
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04/18/06-80061-001 $350.00

DO NOT WRITE IN THIS SPACE

STAPLE CHECK HERE

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: M. B 3-20-6
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #