## 2008 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A9800000018

FILED Apr 16, 2008 Secretary of State

Entity Name: CENTRAL MAGNETIC IMAGING OPEN MRI OF PLANTATION, LTD.

Current Principal Place of Business: New Principal Place of Business:

150 NW 70TH AVE., #1 PLANTATION, FL 33317

Current Mailing Address: New Mailing Address:

 1888 SABAL PALM DR.
 150 NW 70TH AVE., #1

 BOCA RATON, FL 33432
 PLANTATION, FL 33317

FEI Number: 65-0808141 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

VARNER, CLAYTON R II

1888 SABAL PALM DR.

BOCA RATON, FL 33432 US

VARNER, CLAYTON R II

150 NW 70TH AVE.

SUITE 1

OCA RATON, FL 33432 US SOITE T PLANTATION, FL 33317 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: 04/16/2008

Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #: P97000106757

Name: VARNER MEDICAL VENTURES, INC.

 Address:
 1888 SABAL PALM DR.
 Address:
 150 NW 70TH AVE. SUITE 1

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 PLANTATION, FL 33317

Document #: P97000106758

Name: MEDICAL VENTURES (BROWARD), INC.

 Address:
 1888 SABAL PALM DR.
 Address:
 150 NW 70TH AVE. SUITE1

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 PLANTATION, FL 33317

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 is true and accurate and that my electronic 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: CLAYTON VARNER 04/16/2008