


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90067 047 ***150.00

DOCUMENT # F00000002460	
1. Entity Name PET SCANS OF AMERICA CORP.	

Principal Place of Business 1500 WEST PARK DRIVE SUITE 390 WESTBOROUGH, MA 01581	Mailing Address 1500 WEST PARK DRIVE SUITE 390 WESTBOROUGH, MA 01581
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2. Principal Place of Business 1900 S. STATE COLLEGE BLVD Suite, Apt. #, etc. SUITE 600 City & State ANATHEIM, CA Zip 92806 Country USA	3. Mailing Address 1900 S. STATE COLLEGE BLVD Suite, Apt. #, etc. SUITE 600 City & State ANATHEIM, CA Zip 92806 Country USA
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60017633



01242006 Chg-P CR2E034 (11/05)

4. FEI Number 22-3668419	Applied For 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 DIAGNOSTIC MEDICAL IMAGING SERVICES, INC. 7406 S.W. 48TH STREET 2ND FLOOR MIAMI, FL 33155

7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD C/O CT Corporation System City PLANTATION FL Zip Code 33324

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  M.T. FITZPATRICK
ASSISTANT SECRETARY
(NOTE: Registered Agent signature required when reinstating)
DATE 2/12/06

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MADSEN, JORGEN 1500 WEST PARK DRIVE, SUITE 390 WESTBOROUGH, MA 01581 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN, CEO, DIRECTOR PAUL S. VIVIANO 1900 S. STATE COLLEGE BLVD #600 ANATHEIM, CA 92806 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOMBARDI, ROBERT 1500 WEST PARK DRIVE, SUITE 390 WESTBOROUGH, MA 01581 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP, CFO & DIRECTOR HOWARD L. AMARA 1900 S. STATE COLLEGE BLVD #600 ANATHEIM, CA 92806 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP, GEN COUNSEL, SECRETARY, DIRECTOR RUSSELL D. PHILLIPS, JR. 1900 S. STATE COLLEGE BLVD #600 ANATHEIM, CA 92806 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, ASST SECRETARY NICHOLAS A. POAN 1900 S. STATE COLLEGE BLVD #600 ANATHEIM, CA 92806 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	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:  NICHOLAS A. POAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 2-13-06
Daytime Phone # 714-688-7106