## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000005905

Entity Name: IRADIMED CORP.

FILED Jan 25, 2007 Secretary of State

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

7457 ALOMA AVE. SUITE 201

WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

7457 ALOMA AVE. SUITE 201 WINTER PARK, FL 32792

FEI Number: 73-1408526 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:

SUSI, ROGER SUSI, ROGER 4099 SCARLET IRIS CL. 7457 ALOMA AVE

WINTER PARK, FL 32792 US SUITE 201

WINTER PARK, FL 32792 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: ROGER SUSI 01/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC ( ) Delete Title: PC (X) Change ( ) Addition

Name: SUSI, ROGER Name: SUSI, ROGER

 Address:
 7457 ALOMA AVE. SUITE 701
 Address:
 7457 ALOMA AVE. SUITE 201

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:
 WINTER PARK, FL 32792

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 NOVOVICH, SERGE
 Name:

 Address:
 9522 E. 78TH PLACE
 Address:

 City-St-Zip:
 TULSA, OK 74133
 City-St-Zip:

 Name:
 SUSI, ED
 Name:
 WALDMAN, LOUIS

 Address:
 7457 ALOMA AVE #201
 Address:
 7457 ALOMA AVE #201

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:
 WINTER PARK, FL 32792

I hereby certify that the information supplied with this filing does not qualify for the 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: LOUIS WALDMAN TD 01/25/2007