

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J39311

FILED
Apr 30, 2008
Secretary of State

Entity Name: MRI CENTER MANAGEMENT, INC.

Current Principal Place of Business:

4-C COLUMBIA DR.,#110
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

ATTN: OMMI ACETG DEPT
PO BOX 30728
TAMPA, FL 336303728

New Mailing Address:

FEI Number: 59-2759722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUMANN, SHELLY P
511 W BAY ST #301
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

BAUMANN, SHELLY P
2700 UNIVERSITY SQUARE DRIVE
TAMPA, FL 333612 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: _____

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BAUMANN, SHELLY P
Address: 511 W BAY ST #301
City-St-Zip: TAMPA, FL 33606

Title: VP () Delete
Name: POKLEPOVIC, JERRY
Address: 511 W BAY ST #301
City-St-Zip: TAMPA, FL 33606

Title: SD () Delete
Name: BLACK, THOMAS
Address: 511 W. BAY STREET, # 301
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BAUMANN, SHELLY P
Address: 2700 UNIVERSITY SQUARE DRIVE
City-St-Zip: TAMPA, FL 336125513

Title: VP (X) Change () Addition
Name: POKLEPOVIC, JERRY
Address: 2700 UNIVERSITY SQUARE DRIVE
City-St-Zip: TAMPA, FL 33612

Title: SD (X) Change () Addition
Name: BLACK, THOMAS
Address: 2700 UNIVERSITY SQUARE DRIVE
City-St-Zip: TAMPA, FL 33612

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 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: SHELLY P BAUMANN

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date