

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005484

FILED
Apr 28, 2008
Secretary of State

Entity Name: ELITE IMAGING, LLC

Current Principal Place of Business:

2845 AVENTURA BLVD
SUITE 145
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

PO BOX 802431
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 65-1091915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH ST.
FT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SELECT MEDICAL GROUP, , LLC
Address: PO BOX 802431
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: MAZ 18 HOLDINGS, INC., .
Address: 22 N. HIBISCUS DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: OMEGA 44, INC.,
Address: PO BOX 802431
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK ZHUK

MGRM

04/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date