2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009222

FILED Apr 19, 2005 Secretary of State

Entity Name: SIGNET DIAGNOSTIC IMAGING SERVICES (NORTH MIAMI), LLC

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

1515 N. FEDERAL HWY., STE. 405 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

1515 N. FEDERAL HWY., STE. 405 BOCA RATON, FL 33432

FEI Number: 51-0456859 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:

LAWL PUERTO RICO, LLP

1515 NORTH FEDERAL HWY
SUITE 405
BOCA RATON, FL 33432 US

DELEVIE, MARK N

1515 NORTH FEDERAL HWY
SUITE 405
BOCA RATON, FL 33432 US

DELEVIE, MARK N

1515 NORTH FEDERAL HWY
SUITE 405
BOCA RATON, FL 33432 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.

CICNATURE: MARK N. DELEVIE

SIGNATURE: MARK N. DELEVIE 04/19/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 KEYNEJAD, JAMSHID
 Name:

 Address:
 1515 NORTH FEDERAL HWY, SUITE 405
 Address:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMSHID KEYNEJAD MGRM 04/19/2005