

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027017

FILED  
Apr 07, 2006  
Secretary of State

Entity Name: OPEN MRI OF DELRAY LLC

## Current Principal Place of Business:

15127 JOG RD  
SUITE 101  
DELRAY BEACH, FL 33484

## New Principal Place of Business:

## Current Mailing Address:

15127 JOG RD  
SUITE 101  
DELRAY BEACH, FL 33484

## New Mailing Address:

FEI Number: 56-2420868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHIESS, MICHAEL  
400 S DIXIE HWY, STE 121  
BOCA RATON, FL 33432 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: LHOTKA, JOSEPH  
Address: 22564 CARVELLE CIRCLE  
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM ( ) Delete  
Name: SCHIESS, MICHAEL  
Address: 6139 VIA VENETIA SOUTH  
City-St-Zip: DELRAY BEACH, FL 33484

## ADDITIONS/CHANGES:

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 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: MICHAEL SCHIESS

MGRM

04/07/2006

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