


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2007 8:00 am
Secretary of State

07-06-2007 90036 046 ****50.00

DOCUMENT # L04000037376

1. Entity Name
PINNACLE IMAGING CENTER, LLC



Principal Place of Business 2390 N.W. 7TH STREET, SUITE #103 MIAMI, FL 33125	Mailing Address 2390 N.W. 7TH STREET, SUITE #103 MIAMI, FL 33125
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DO NOT WRITE IN THIS SPACE

40123155



01042007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 01-0814337	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FENTE, MANUEL F ESQ
 1110 BRICKELL AVENUE, 7TH FL
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

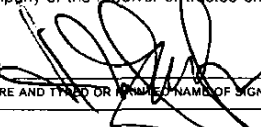
Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR JAAFAR, ALI H 2390 N.W. 7TH STREET, SUITE #103 MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Date: 7/3/07 Daytime Phone # _____

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE