

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054686

FILED
Jul 06, 2006
Secretary of State

Entity Name: MR SERVICES I, LLC

Current Principal Place of Business:

4310 SHERIDAN STREET
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

4310 SHERIDAN STREET
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 54-2156456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

INDEPENDENT RADIOLOGICAL CONSULTANTS INC.
8362 PINES BLVD.
SUITE 103
PEMBROKE PINES, FL 33024 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: INDEPENDENT RADIOLOG, ICAL CONSULTANTS
Address: 8362 PINES BLVD. SUITE102
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: MGRM (X) Delete
Name: CRYSTAL IMAGING INC.,
Address: 1985 S. TAMiami TRAIL
City-St-Zip: OSPREY, FL 34229 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HOWLE, STACEY E
Address: 4310 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: STACEY HOWLE

MGMR

07/06/2006

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