

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067421

FILED
Feb 17, 2006
Secretary of State

Entity Name: UNIVERSITY MRI RESEARCH AND EDUCATION FOUNDATION, LLC

Current Principal Place of Business:

3848 FAU BLVD., SUITE 200
BOCA RATON, FL 33431

New Principal Place of Business:

3848 FAU BLVD., SUITE 200
BOCA RATON, FL 33431 US

Current Mailing Address:

3848 FAU BLVD., SUITE 200
BOCA RATON, FL 33431

New Mailing Address:

3848 FAU BLVD., SUITE 200
BOCA RATON, FL 33431 US

FEI Number: 75-3166862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEINBERG, FRED L
2581 N.W. 59TH STREET
BOCA RATON, FL 33496 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: FRED, STEINBERG L M.D.
Address: 2581 N.W. 59TH STREET
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STEINBERG, FRED L M.D.
Address: 2581 N.W. 59TH STREET
City-St-Zip: BOCA RATON, FL 33496 US

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: FRED L STEINBERG M.D.

MGRM

02/17/2006

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