

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087705

FILED
Apr 28, 2007
Secretary of State

Entity Name: FLORIDA HEALTH IMAGING GROUP LLC

Current Principal Place of Business:

PO BOX 641443
BEVERLY HILLS, FL 34464 US

New Principal Place of Business:

521 WEST FORT ISLAND TRAIL
SUITE A, PLANTATION POINTE
CRYSTAL RIVER, FL 34429 US

Current Mailing Address:

PO BOX 641443
BEVERLY HILLS, FL 34464 US

New Mailing Address:

FEI Number: 72-1589106 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLARDY, JOHN S III
521 W FT ISLAND TRAIL
PLANTATION POINTE SUITE A
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

CLARDY, JOHN S III
521 WEST FORT ISLAND TRAIL
PLANTATION POINTE, SUITE A
CRYSTAL RIVER, FL 34429 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.

SIGNATURE: _____

04/28/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SANON, ASHISH
Address: PO BOX 641443
City-St-Zip: BEVERLY HILLS, FL 34464 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ASHISH SANON

MGRM

04/28/2007

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