2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 28, 2008
Secretary of State

DOCUMENT# L04000090464

Entity Name: SHERIDAN MRI & DIAGNOSTICS, LLC

Current Principal Place of Business:

1757 CORAL WAY
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

1757 CORAL WAY
MIAMI, FL 33145

New Mailing Address:

PO BOX 144132
CORAL GABLES, FL 33114

FEI Number: 56-2509875 **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:

CORPORATION COMPANY OF MIAMI (GLT)
1500 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI, FL 33131 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: PRES ( ) Delete
Name: CORAL WAY MRI & DIAG, NOSTICS, LLLP
Address: 1757 CORAL WAY
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: CORAL WAY MRI & DIAG, NOSTICS, LLLP
Address: PO BOX 144132
City-St-Zip: CORAL GABLES, FL 33114

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: STUART A. KLASKIN MGR 07/28/2008

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