

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017500

**FILED**  
**May 17, 2008**  
**Secretary of State**

**Entity Name:** GLOBAL CT AND MRI CONSULTING, LLC

**Current Principal Place of Business:**

800 CRANDON BOULEVARD  
SUITE 213  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

1111 CRANDON BOULEVARD  
SUITE B-501  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

**FEI Number:** 56-2503255      **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:**

**Name and Address of New Registered Agent:**

SOILA, KALEVI  
1111 CRANDON BLVD., B--501  
KEY BISCAYNE, FL 33149      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: SOILA, KALEVI  
Address: 1111 CRANDON BLVD., STE. #B-501  
City-St-Zip: KEY BISCAYNE, FL 33149

**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: KALEVI SOILA

M.D.

05/17/2008

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