

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000023354

FILED
Jul 04, 2007
Secretary of State**Entity Name:** MEDIAGNOSTIC & ASSOCIATED, LLC**Current Principal Place of Business:**16749 NW 13TH COURT
PEMBROKE PINES, FL 33028**New Principal Place of Business:****Current Mailing Address:**16749 NW 13TH COURT
PEMBROKE PINES, FL 33028**New Mailing Address:****FEI Number:** 36-4570503**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORIYON, L S
16749 NW 13 COURT
PEMBROKE PINES, FL 33028 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:** MGR () Delete
Name: MORIYON, LUIS E
Address: 16749 NW 13TH COURT
City-St-Zip: PEMBROKE PINES, FL 33028**Title:** ME (X) Delete
Name: MORIYON, LUZ S
Address: 16749 NW 13TH COURT
City-St-Zip: PEMBROKE PINES, FL 33028**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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: LUIS E MORIYON

MGM

07/04/2007

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