2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2010
Secretary of State

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Entity Name: FLATIRONS MRI, LLC

Current Principal Place of Business:

363 CENTENNIAL PARKWAY
SUITE 120, CORPORATE CENTER II
LOUISVILLE, CO 80027 US

New Principal Place of Business:

Current Mailing Address:

6822 -- 22ND AVE NORTH
PMB 430
ST PETERSBURG, FL 33710 US

New Mailing Address:

FEI Number: 30-0177445 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORE MEDICAL, LLC
5959 CENTRAL AVE
SUITE 100
ST. PETERSBURG, FL 33710 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
Name: CORE MEDICAL, LLC
Address: 5959 CENTRAL AVE, STE 100
City-St-Zip: ST. PETERSBURG, FL 33710 US

I hereby 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 Statues.

SIGNATURE: GAYLA HIEBER MGR 04/13/2010

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