

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064678

FILED
Apr 18, 2007
Secretary of State

Entity Name: CALIFORNIA CLUB DIAGNOSTIC CENTER, L.L.C.

Current Principal Place of Business:

850 IVES DAIRY ROAD, UNIT 14
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

850 IVES DAIRY ROAD, UNIT 14
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 22-3936247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: BARONOV, ALEXANDER
Address: 850 IVES DAIRY ROAD, UNIT 14
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGR () Delete
Name: SABYROVA, LANA CHOLPON
Address: 850 IVES DAIRY ROAD, UNIT 14
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: S () Delete
Name: SABYROVA, LANA CHOLPON
Address: 850 IVES DAIRY ROAD, UNIT 14
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: T () Delete
Name: BARONOV, ALEXANDER
Address: 850 IVES DAIRY ROAD, UNIT 14
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES:

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

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

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 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: BARONOV ALEXSANDER

MGR

04/18/2007

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