

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098474

FILED
Jan 03, 2007
Secretary of State

Entity Name: THE IMAGING GROUP, LLC

Current Principal Place of Business:

3399 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

3399 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 11-3792732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

KLASKIN, STUART A MGRM
3399 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 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: STUART KLASKIN

01/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KLASKIN, STUART
Address: PO BOX 144132
City-St-Zip: CORAL GABLES, FL 33114 US

Title: MGRM () Delete
Name: HAMMER, THOMAS
Address: PO BOX 144132
City-St-Zip: CORAL GABLES, FL 33114 US

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 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 KLASKIN

MGRM

01/03/2007

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