

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089254

FILED
Mar 19, 2008
Secretary of State

Entity Name: CUSTOM RADIOLOGY SOLUTIONS, LLC

Current Principal Place of Business:

845 S TOWN AND RIVER DR
FT MYERS, FL 33919

New Principal Place of Business:

13731 METROPOLIS AVE
FT MYERS, FL 33912

Current Mailing Address:

845 S TOWN AND RIVER DR
FT MYERS, FL 33919

New Mailing Address:

FEI Number: 26-0820623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KYLE, KEVIN A
1380 ROYAL PALM SQUARE BLVD
FT MYERS, FL 33919 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: SHAH, SAURIN J
Address: 845 S TOWN AND RIVER DR
City-St-Zip: FT MYERS, FL 33919

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHAH, SAURIN J
Address: 845 S TOWN AND RIVER DR
City-St-Zip: FT MYERS, FL 33919

Title: MGRM () Change (X) Addition
Name: MARGOLIN, CHAIM J
Address: 14631 SAFE LANDING CT
City-St-Zip: FORT MYERS, FL 33908

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: SAURIN SHAH

MGRM

03/19/2008

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