

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000097347

**FILED
Apr 30, 2008
Secretary of State**

Entity Name: RADIOLOGY INSTITUTE OF FLORIDA LLC

Current Principal Place of Business:

20810 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

20810 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 US

New Mailing Address:

FEI Number: 26-1123520 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

A.R.S. & ASSOCIATES INC
20810 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 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 () Delete
Name: ROSSI, YURIEN
Address: 20810 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIA BEACH, FL 33180 US

ADDITIONS/CHANGES:

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: YURIEN ROSSI

M

04/30/2008

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