

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041144

Entity Name: MY MED IMAGE, LLC

FILED
Feb 02, 2010
Secretary of State

Current Principal Place of Business:

199 OCEAN LANE DRIVE
SUITE 1114
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

41 SE 5 STREET
SUITE 2009
MIAMI, FL 33131 US

Current Mailing Address:

199 OCEAN LANE DRIVE
SUITE 1114
KEY BISCAYNE, FL 33149 US

New Mailing Address:

41 SE 5 STREET
SUITE 2009
MIAMI, FL 33131 US

FEI Number: 26-2570075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANCOCK, CHRISTOPHER R
199 OCEAN LANE DRIVE
1114
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

ARCILA, GABRIEL
41 SE 5 STREET
2009
MIAMI, FL 33131 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: GABRIEL ARCILA

02/02/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ARCILA, GABRIEL
Address: 100 EDGEWATER DRIVE SUITE 209
City-St-Zip: CORAL GABLES, FL 33133 US

Title: MGRM
Name: EBER, DARYL
Address: 31 SE 5TH STREET SUITE 1502
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM
Name: CHEN, HALLAND
Address: 480 NE 30TH STREET SUITE L105
City-St-Zip: MIAMI, FL 33137 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 Statutes.

SIGNATURE: GABRIEL ARCILA

MGR

02/02/2010

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