2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2011
Secretary of State

DOCUMENT# L08000046168

Entity Name: CARDIOVASCULAR IMAGING CENTER OF FLORIDA, LLC

Current Principal Place of Business:

8142 LAKE SERENE DRIVE
ORLANDO, FL 32836

New Principal Place of Business:

6647 WINDER OAKS BLVD
ORLANDO, FL 32819

Current Mailing Address:

8142 LAKE SERENE DRIVE
ORLANDO, FL 32836

New Mailing Address:

6647 WINDER OAKS BLVD
ORLANDO, FL 32819

FEI Number: 26-2863635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALI, SYED I
8142 LAKE SERENE DRIVE
ORLANDO, FL 32836 US

Name and Address of New Registered Agent:

ALI, SYED I
6647 WINDER OAKS BLVD
ORLANDO, FL 32819 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: _____ 04/26/2011
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ALI, SYED I
Address: 6647 WINDER OAKS BLVD
City-St-Zip: ORLANDO, FL 32819

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 Statues.

SIGNATURE: SYED I. ALI MGRM 04/26/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date