

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000109606

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** TAMPA MRI , LLC

**Current Principal Place of Business:**

4726 NORTH HABANA AVENUE  
SUITE 104  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

2805 NORTH ARMENIA AVENUE  
TAMPA, FL 33607

**New Mailing Address:**

4726 NORTH HABANA AVENUE  
SUITE 104  
TAMPA, FL 33614

**FEI Number:** 80-0315625

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAINAS, ADRIANA L  
2306 ST. JOSEPH STREET  
TAMPA, FL 33607 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  
Name: CAINAS, ADRIANA L  
Address: 2306 ST. JOSEPH STREET  
City-St-Zip: TAMPA, FL 33607

Title: MGR  
Name: CORNS, MARISA M  
Address: 2306 ST JOSEPH STREET  
City-St-Zip: TAMPA, FL 33607

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: ADRIANA L CAINAS

MGR

04/30/2011

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