2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# M04000001472

Entity Name: VYMED DIAGNOSTIC IMAGING / TAMPA, LLC

Current Principal Place of Business:

10010 DALE MABRY HWY
SUITE 160
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

555 SUN VALLEY DR STE P-4
ROSWELL, GA 30076

New Mailing Address:

FEI Number: 20-0881710 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COUSIN, ALAN MD
10010 N DALE MABRY HWY STE 160
TAMPA, FL 33618 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: DUNCAN, WILLIAM J PH.D
Address: 555 SUN VALLEY DRIVE SUITE P-4
City-St-Zip: ROSWELL, GA 30076

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: WILLIAM J. DUNCAN PH.D MGR 04/16/2009

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