

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000580

FILED
Apr 18, 2012
Secretary of State

Entity Name: SIEMENS DIAGNOSTICS FINANCE CO. LLC

Current Principal Place of Business:

1717 DEERFIELD ROAD
DEERFIELD, IL 60015

New Principal Place of Business:

1717 DEERFIELD ROAD
DEERFIELD, IL 60015 US

Current Mailing Address:

1717 DEERFIELD ROAD
DEERFIELD, IL 60015

New Mailing Address:

% SIEMENS CORPORATION
170 WOOD AVENUE SOUTH
ISELIN, NJ 08830 US

FEI Number: 90-0128163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name: SIEMENS HEALTHCARE DIAGNOSTICS INC.
Address: 511 BENEDICT AVENUE
City-St-Zip: TARRYTOWN, NY 10591 US

Title: D P
Name: WRUMNIG, WOLFGANG
Address: 511 BENEDICT AVENUE
City-St-Zip: TARRYTOWN, NY 10591 US

Title: CFO
Name: FUESSINGER, EVELYN
Address: 3850 QUADRANGLE BOULEVARD
City-St-Zip: ORLANDO, FL 32817 US

Title: DVPS
Name: DEARBORN, CHARLES
Address: 511 BENEDICT AVENUE
City-St-Zip: TARRYTOWN, NY 10591 US

Title: T
Name: FUNK, SEBASTIAN
Address: ALLEE AM ROETHELHEIMPARK 21
City-St-Zip: ERLANGEN, GERMANY, XX 91052 US

Title: AS
Name: COLE, LAURA
Address: 1717 DEERFIELD ROAD
City-St-Zip: DEERFIELD, IL 60015 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: LAURA COLE

AS

04/18/2012

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