2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001662

City-St-Zip:

FORT WORTH, TX 76104

Entity Name: PIN POINT RADIOLOGY, LLC

FILED Jul 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1412 W. MAGNOLIA, #100 FORT WORTH, TX 76104 **Current Mailing Address: New Mailing Address:** 1412 W. MAGNOLIA, #100 FORT WORTH, TX 76104 FEI Number: 20-2714392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition AUTRY, STEVEN Name: DOWLING, GREG Name: 1412 W. MAGNOLIA, #100 Address: 1412 W. MAGNOLIA, #100 Address: City-St-Zip: FORT WORTH, TX 76104 City-St-Zip: FORT WORTH, TX 76104 Title: MGRM () Delete Title: () Change () Addition BAKER, JAMES T Name: Name: Address: 1412 W. MAGNOLIA, #100 Address: City-St-Zip: FORT WORTH, TX 76104 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition ECKERT, MARK Name: EUCKERT, MARK Name: 1412 W. MAGNOLIA, #100 Address: 1412 W. MAGNOLIA, #100 Address: City-St-Zip: FORT WORTH, TX 76104 City-St-Zip: FORT WORTH, TX 76104 Title: MGRM (X) Delete Title: () Change () Addition Name: DOWLING, GREG Name: Address: 1412 W. MAGNOLIA, #100 Address:

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.

City-St-Zip:

SIGNATURE: MARK EUCKERT MGRM 07/16/2007