2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M77533

Entity Name: SUNCOAST DIAGNOSTIC, INC.

MAPLE GLEN, PA 19002

City-St-Zip:

FILED May 03, 2005 Secretary of State

Elluty Nai	me: SUNCOA	ST DIAGNOSTIC, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	TH TAMIAMI T A, FL 34243	RAIL US			
Current Mailing Address:			New Mailing Address:		
	TH TAMIAMI T A, FL 34243	RAIL US			
FEI Number:	: 59-2898883	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
7458 NOR SARASOT	EE ANN FROS TH TAMIAMI T A, FL 34243	RAIL US			
	named entity s e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CORRY, LEE-A 7458 N. TAMIAN SARASOTA, FL	/II TRAIL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	VP () DE VINCENT, H 216 WESTMINS	*	Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE-ANN FROST CORRY PRES 05/03/2005