

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000110327

**FILED**  
**Apr 14, 2012**  
**Secretary of State**

**Entity Name:** ADVANCED BREAST IMAGING SERVICES, INC

**Current Principal Place of Business:**

1121 PARK LN  
HAVERHILL, FL 33417 US

**New Principal Place of Business:**

2136 CROSSHAIR CIRCLE  
ORLANDO, FL 32837 US

**Current Mailing Address:**

PO BOX 586  
DORADO, PR 00646 US

**New Mailing Address:**

**FEI Number:** 45-0464832      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ALVAREZ, ILIANA I  
1121 PARK LN  
HAVERHILL, FL 33417 US

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

ALVAREZ, ILIANA I  
2136 CROSSHAIR CIRCLE  
ORLANDO, FL 32837 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: ILIANA I. ALVAREZ

04/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALVAREZ, ILIANA I  
Address: 2136 CROSSHAIR CIRCLE  
City-St-Zip: ORLANDO, FL 32837 US

I hereby 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 all other like empowered.

SIGNATURE: ILIANA I. ALVAREZ

P

04/14/2012

Electronic Signature of Signing Officer or Director

Date