

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111507

FILED
Apr 28, 2008
Secretary of State

Entity Name: DIAGNOSTIC SONOGRAPHY SERVICES, INC.

Current Principal Place of Business:

12700 BARTRAM PARK BLVD
#732
JACKSONVILLE, FL 32258

New Principal Place of Business:

5927 BRUSH HOLLOW RD.
JACKSONVILLE, FL 32258

Current Mailing Address:

12700 BARTRAM PARK BLVD
#732
JACKSONVILLE, FL 32258

New Mailing Address:

5927 BRUSH HOLLOW RD.
JACKSONVILLE, FL 32258

FEI Number: 59-3761094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AYALA, NELSON E
12700 BARTRAM PARK BLVD
732
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

AYALA, NELSON E
5927 BRUSH HOLLOW RD
JACKSONVILLE, FL 32258 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:

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AYALA, NELSON E
Address: 12700 BARTRAM PARK BLVD #732
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AYALA, NELSON E
Address: 5927 BRUSH HOLLOW RD
City-St-Zip: JACKSONVILLE, FL 32258

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 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: NELSON E. AYALA

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date