

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046176

FILED
Apr 28, 2006
Secretary of State

Entity Name: ADVANCE CARDIOVASCULAR IMAGING, INC.

Current Principal Place of Business:

11401 S.W. 40 ST.
SUITE 328
MIAMI, FL 33165

New Principal Place of Business:

10000 SW 56 ST
SUITE 4
MIAMI, FL 33165

Current Mailing Address:

11401 S.W. 40 ST.
SUITE 328
MIAMI, FL 33165

New Mailing Address:

10000 SW 56 ST
SUITE 4
MIAMI, FL 33165

FEI Number: 03-0445319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE VILLIERS, ALEJANDRO
11401 S.W. 40 ST.
SUITE 328
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

DE VILLIERS, ALEJANDRO
10000 SW 56 ST
SUITE 4
MIAMI, FL 33165 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:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DE VILLIERS, ALEJANDRO
Address: 10335 S.W. 41ST ST.
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: DE VILLIERS, ALEJANDRO
Address: 9480 SW 108 ST
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the 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: ALEJANDRO DE VILLIERS, PRESIDENT

CEO

04/28/2006

Electronic Signature of Signing Officer or Director

Date