

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060860

Entity Name: MIAMI-DADE CT SCAN IMAGING, INC.

FILED
May 22, 2006
Secretary of State

Current Principal Place of Business:

5200 SW 8TH ST., SUITE 117
CORAL GABLES, FL 33134

New Principal Place of Business:

5200 SW 8TH ST., SUITE 117
CORAL GABLES, FL 33134 US

Current Mailing Address:

5200 SW 8TH ST., SUITE 117
CORAL GABLES, FL 33134

New Mailing Address:

5200 SW 8TH ST., SUITE 117
CORAL GABLES, FL 33134 US

FEI Number: 03-0457551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HECHAVARRIA, MANUEL D
5200 SW 8TH ST., SUITE 117
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HECHAVARRIA, MANUEL D
Address: 5200 SW 8TH ST., SUITE 117
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HECHAVARRIA, MANUEL D
Address: 5200 SW 8TH ST., SUITE 117
City-St-Zip: CORAL GABLES, FL 33134 US

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: MANUEL HECHAVARRIA

PD

05/22/2006

Electronic Signature of Signing Officer or Director

Date