2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000094994

Entity Name: RADIOLOGY MOBIL CENTER, INC.

FILED Mar 24, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

4820 SW 8 ST 5200 SW 8 ST

CORAL GABLES, FL 33134 #206B

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

4820 SW 8 ST 5200 SW 8 ST

CORAL GABLES, FL 33134 #206B

CORAL GABLES, FL 33134

FEI Number: 43-1972627 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:

 LEMUS, RAUDEL
 305 W 68 ST
 5200 SW 8 ST

 APT 409
 #206B

HIALEAH, FL 33014 US CORAL GABLES, FL 33134 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: RAUDEL LEMUS 03/24/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: LEMUS, RAUDEL P (X) Change () Addition Name: LEMUS, RAUDEL

 Address:
 305 W 68 ST APT #409
 Address:
 5200 SW 8 ST #206B

 City-St-Zip:
 HIALEAH, FL 33014
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: () Delete Title: VP () Change (X) Addition Name: MARTINEZ, ARIEL A

 Name:
 MARTINEZ, ARIEL A

 Address:
 Address:
 5200 SW 8 ST #206B

 City-St-Zip:
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 LONGO, YOLANDA

 Address:
 Address:
 5200 SW 8 ST #206B

 City-St-Zip:
 City-St-Zip:
 CORAL GABLES, FL 33134

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: RAUDEL LEMUS P 03/24/2008