

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087103

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** ADVANCE DIAGNOSTIC ALLIANCE FOR MEDICAL IMAGING, INC.

**Current Principal Place of Business:**

14350 SW 142 AVE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

14350 SW 142 AVE  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 20-2895394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROCHETEAU, RALPH  
9360 S.W. 77TH STREET  
SUITE 225  
MIAMI, FL 33173 US

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

ROCHETEAU, RALPH  
9360 SUNSET DRIVE  
SUITE 225  
MIAMI, FL 33173 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:

Electronic Signature of Registered Agent

04/30/2009

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CABRERA, SERGIO F  
Address: 17920 SW 192 ST  
City-St-Zip: MIAMI, FL 33187

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SERGIO F. CABRERA

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date