

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000097453

FILED
Apr 22, 2008
Secretary of State**Entity Name:** DIMENSIONAL DIAGNOSTIC IMAGING INC.**Current Principal Place of Business:**664 EAST 25 STREET
SUITE 102
HIALEAH, FL 33013**New Principal Place of Business:****Current Mailing Address:**664 EAST 25 STREET
SUITE 102
HIALEAH, FL 33013**New Mailing Address:****FEI Number:** 51-0482126**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALI, ALI
664 EAST 25 STREET
SUITE 102
HIALEAH, FL 33013 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**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: ALI, ALI
Address: 664 EAST 25 STREET SUITE 102
City-St-Zip: HIALEAH, FL 33013**Title:** D () Delete
Name: ALI, RAQUEL
Address: 664 EAST 25 STREET SUITE 102
City-St-Zip: HIALEAH, FL 33013**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP () Change (X) Addition
Name: MARONO, JULIA
Address: 664 EAST 25 STREET SUITE 102
City-St-Zip: HIALEAH, FL 33013

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: RAQUEL ALI

D

04/22/2008

Electronic Signature of Signing Officer or Director_____
Date