2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000133527

Entity Names DADIOLOGIC COLLITIONS

3906 W MONROE ST

CHICAGO, IL 60624

Address: City-St-Zip: FILED Oct 25, 2006 Secretary of State

Entity Name: RADIOLOGIC SOLUTIONS INC. **Current Principal Place of Business: New Principal Place of Business:** 10180 NW 21ST COURT PEMBROKE PINES, FL 33026 **Current Mailing Address: New Mailing Address:** 10180 NW 21ST COURT PEMBROKE PINES, FL 33026 FEI Number: 04-3780955 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: RAINES, JAMES 10180 NW 21ST COURT US PEMBROKE PINES, FL 33026 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: /JAMES RAINES/ 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PCFO** () Delete () Change () Addition RAINES, JAMES Name: Name: 10180 NW 21ST COURT Address: Address: City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: Title: CFO Title: () Delete () Change () Addition RAINES, MARILYN Name: Name: 10180 NW 21ST COURT Address: Address: PEMBROKE PINES, FL 33026 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition RAINES, HERMAN K Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: /JAMES RAINES/ CEO 10/25/2006