

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087050

FILED  
Jan 25, 2008  
Secretary of State

**Entity Name:** ADVANCED MEDICAL IMAGING OF PINELLAS, INC.

**Current Principal Place of Business:**

9555 SEMINOLE BOULEVARD, SUITE 101  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

9555 SEMINOLE BOULEVARD, SUITE 101  
SEMINOLE, FL 33772

**New Mailing Address:**

**FEI Number:** 20-1463265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARVAJAL, JOAN S  
9555 SEMINOLE BOULEVARD, SUITE 101  
SEMINOLE, FL 33772 US

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

CARVAJAL, RAFAEL  
9555 SEMINOLE BOULEVARD, SUITE 101  
SEMINOLE, FL 33772 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: RAFAEL CARVAJAL

01/25/2008

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CARVAJAL, JOAN J  
Address: 9555 SEMINOLE BOULEVARD, SUITE 101  
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete  
Name: CARVAJAL, REFAEL  
Address: 9555 SEMINOLE BOULEVARD, SUITE 101  
City-St-Zip: SEMINOLE, FL 33772

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

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

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: RAFAEL CARVAJAL

D

01/25/2008

Electronic Signature of Signing Officer or Director

Date