2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# P05000064823

Entity Name: CARDIAC STRESS IMAGING, INC.

Current Principal Place of Business:

17501 O'HARA DRIVE
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

3420 TAMIAMI TRAIL
SUITE 1
PORT CHARLOTTE, FL 33952

Current Mailing Address:

C/O DAVID A HOLMES
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 20-2944118 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLMES, DAVID A
99 NESBIT STREET
PUNTA GORDA, FL 33950 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: ROSS, STEPHEN M
Address: 17501 O'HARA DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VD ( ) Delete
Name: WHITE, JAMES E
Address: 3430 TAMIAMI TRAIL, SUITE B
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VD ( ) Delete
Name: FLESZAR, DAVID
Address: 17501 O'HARA DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: ROSS, STEPHEN M
Address: 3420 TAMIAMI TRAIL, SUITE 1
City-St-Zip: PORT CHARLOTTE, FL 33952

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

Title: VD (X) Change ( ) Addition
Name: FLESZAR, DAVID
Address: 3420 TAMIAMI TRAIL, SUITE 1
City-St-Zip: PORT CHARLOTTE, FL 33952

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: JAMES E. WHITE D 04/10/2008
Electronic Signature of Signing Officer or Director Date