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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000071327

1. Entry Name
DOLPHIN DIAGNOSTIC IMAGING, INC.

Principal Place of Business	Mailing Address
% ANDREW MOYE, LLC 822 N MONROE ST TALLAHASSEE, FL 32303	% ANDREW MOYE, LLC 822 N MONROE ST TALLAHASSEE, FL 32303

04292008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 03-0430511 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ANDREWS, STEVEN R % ANDREW MOYE, LLC 822 N MONROE ST TALLAHASSEE, FL 32303	Name: CorpDirect Agents, Inc. Street Address (P.O. Box Number is Not Acceptable): 515 East Park Avenue City: Tallahassee FL Zip Code: 32301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Assistant Secretary 5/15/08
Name of person or entity signing as registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MAURO, KIRK % ANDREW MOYE, LLC - 822 N MONROE ST TALLAHASSEE, FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Bradford Peters 6 Corporate Center Drive, First Floor Melville, New York 11747	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MAURO, DIANE % ANDREW MOYE, LLC - 822 N MONROE ST TALLAHASSEE, FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Timothy Damadian 6 Corporate Center Drive, First Floor Melville, New York 11747	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TB 5/15/08	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bradford Peters May 2008
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL WHO SIGNED ABOVE Date Daytime Phone #