

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000015678

FILED
Feb 27, 2007
Secretary of State

Entity Name: THE IMAGING CENTER OF BOCA RATON, INC.

Current Principal Place of Business:

10257 BREATHWAY PLACE
BOCA RATON, FL 33428

New Principal Place of Business:

10257 BREEZEWAY PLACE
BOCA RATON, FL 33428

Current Mailing Address:

10257 BREATHWAY PLACE
BOCA RATON, FL 33428

New Mailing Address:

10257 BREEZEWAY PLACE
BOCA RATON, FL 33428

FEI Number: 20-8519669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIMES, PAMELA J
10257 BREEZEWAY PL
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

CHIMERA, PAMELA J
10257 BREEZEWAY PL
BOCA RATON, FL 33428 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: PAMELA J. CHIMERA

02/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHIMERA, PAM
Address: 10257 BREATHWAY PLACE
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: LORENTE, HEIDI
Address: 5052 NUATICA LAKE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHIMERA, PAM
Address: 10257 BREEZEWAY PLACE
City-St-Zip: BOCA RATON, FL 33428

Title: D (X) Change () Addition
Name: LORENTE, HEIDI
Address: 5052 NAUTICA LAKE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

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.

SIGNATURE: PAMELA J. CHIMERA

D

02/27/2007

Electronic Signature of Signing Officer or Director

Date