

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000106563

FILED
Feb 15, 2008
Secretary of State

Entity Name: 3D CARDIO DIAGNOSTIC CENTER PA

Current Principal Place of Business:

4502 STABLE DRIVE
VALRICO, FL 33594

New Principal Place of Business:

1020 EAST BRANDON BLVD
101
BRANDON, FL 33511

Current Mailing Address:

4502 STABLE DRIVE
VALRICO, FL 33594

New Mailing Address:

1020 EAST BRANDON BLVD
101
BRANDON, FL 33511

FEI Number: 01-0904618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAFFER, SANDRA S
4502 STABLE DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

JAFFER, SANDRA S
1020 EAST BRANDON BLVD
101
BRANDON, FL 33511 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:

02/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JAFFER, SANDRA S
Address: 4502 STABLE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: BLANCO, MAGDA V
Address: 4502 STABLE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OWNE (X) Change () Addition
Name: JAFFER, ANIL
Address: 1020 EAST BRANDON BLVD SUITE 101
City-St-Zip: BRANDON, FL 33511

Title: OWNE (X) Change () Addition
Name: JAFFER, SANDRA
Address: 1020 EAST BRANDON BLVD SUITE 101
City-St-Zip: BRANDON, FL 33511

Title: OWNE () Change (X) Addition
Name: BLANCO, MAGDA
Address: 1020 EAST BRANDON BLVD SUITE 101
City-St-Zip: BRANDON, FL 33511

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: ANIL JAFFER

OWNE

02/15/2008

Electronic Signature of Signing Officer or Director

Date