2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# P07000114691

Entity Name: IMAGING NETWORK SOLUTIONS INC.

Current Principal Place of Business:

8004 NW 154 ST STE #620
MIAMI LAKES, FL 33016

New Principal Place of Business:

8004 NW 154 ST
STE 620
MIAMI LAKES, FL 33016

Current Mailing Address:

8004 NW 154 ST STE #620
MIAMI LAKES, FL 33016

New Mailing Address:

8004 NW 154 ST
STE 620
MIAMI LAKES, FL 33016

FEI Number: 26-1359541 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MENCIA, ALBERTO
8004 NW 154 ST STE #620
MIAMI LAKES, FL 33016 US

Name and Address of New Registered Agent:

MENCIA, ALBERTO
8004 NW 154 ST
STE 620
MIAMI LAKES, FL 33016 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: 04/25/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MENCIA, ALBERTO
Address: 8191 NW 98TH LANE
City-St-Zip: HIALEAH GARDENS, FL 33016

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: MENCIA, ALBERTO
Address: 8191 NW 98TH LANE
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: VPS ( ) Change (X) Addition
Name: MENCIA, YOLANDA R
Address: 8191 NW 98 TH LANE
City-St-Zip: HIALEAH GARDENS, FL 33016

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: ALBERTO MENCIA DPT 04/25/2008
Electronic Signature of Signing Officer or Director — Date