2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001142

Entity Name: SOUTH FLORIDA IMAGING, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1920 WEKIVA WAY 5913 SOUTH CONGRESS AVENUE

SUITE 103 LAKE WORTH, FL 33462 WEST PALM BEACH, FL 33411

New Mailing Address: Current Mailing Address:

1920 WEKIVA WAY 5913 SOUTH CONGRESS AVENUE

LAKE WORTH, FL 33462 SUITE 103 WEST PALM BEACH, FL 33411

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LOPEZ, AMADO E LOPEZ, AMADO E 1920 WEKIVA WAY 5913 SOUTH CONGRESS AVE LAKE WORTH, FL 33462

SUITE 103 WEST PALM BEACH, FL 33411 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: AMADO LOPEZ 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

LOPEZ, AMADO E LOPEZ, AMADO E Name: Name:

1920 WEKIVA WAY, SUITE 130 Address: 5913 SOUTH CONGRESS AVENUE Address: City-St-Zip: WEST PALM BEACH, FL 33411 US City-St-Zip: LAKE WORTH, FL 33462 US

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.

Ρ SIGNATURE: AMADO LOPEZ 04/29/2009