

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000011329

FILED
Mar 31, 2011
Secretary of State

Entity Name: A.M. DIAGNOSTIC CENTER, INC.

Current Principal Place of Business:

42 NW, 27 AVE, SUITE 420
MIAMI, FL 33125

New Principal Place of Business:

42 NW, 27 AVE
SUITE 420
MIAMI, FL 33125

Current Mailing Address:

42 NW 27 AVE #420
MIAMI, FL 33125

New Mailing Address:

42 NW 27 AVE
SUITE 420
MIAMI, FL 33125

FEI Number: 26-4227381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, ISABEL
42 NW, 27 AVE, SUITE 420
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MEDINA, ISABEL
Address: 42 NW, 27 AVE, SUITE 420
City-St-Zip: MIAMI, FL 33125

I hereby 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 all other like empowered.

SIGNATURE: ISABEL MEDINA

P

03/31/2011

Electronic Signature of Signing Officer or Director

Date