

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000023313

Entity Name: KENDALL IMAGING, INC.

FILED  
Mar 23, 2007  
Secretary of State

## Current Principal Place of Business:

7361 SW. 120 AVE.  
MIAMI, FL 33183

## New Principal Place of Business:

## Current Mailing Address:

7361 SW. 120 AVE  
MIAMI, FL 33183

## New Mailing Address:

FEI Number: 65-0575800

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ASHOURI, MODAR MD  
9200 SW 92ND STREET  
MIAMI, FL 33173 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: OCON, EVARISTO  
Address: 9200 SW 72ND STREET  
City-St-Zip: MIAMI, FL 33173

Title: DS ( ) Delete  
Name: CALDERON, ROBERTO  
Address: 9200 SW 72ND STREET  
City-St-Zip: MIAMI, FL 33173

Title: DV ( ) Delete  
Name: ASHOURI, MODAR  
Address: 9200 SW 72ND STREET  
City-St-Zip: MIAMI, FL 33173

Title: DT ( ) Delete  
Name: TELLERIA, JUAN  
Address: 9200 SW 72ND STREET  
City-St-Zip: MIAMI, FL 33173

Title: DS ( ) Delete  
Name: BORRERO, GEORGE MD  
Address: 9200 SW 72ND STREET  
City-St-Zip: MIAMI, FL 33173

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MODAR ASHOURI

VP

03/23/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date