2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*FILED SECRETARY OF STATE DIVISION OF CONTERNATIONS DOCUMENT # P96000076525 1. Entity Name 06 JUL -6 PH 3: 27 WOMEN'S DIAGNOSTIC CENTER, INC. Principal Place of Business Mailing Address 01/13/06 90045 004 \$150.00 1357 OAKFIELD DR 1357 OAKFIELD DR BRANDON, FL 33511 BRANDON, FL 33511 ---01052006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3399817 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent GHAEDI, ABDULLAH DO NOT WRITE 1357 OAKFIELD DR BRANDON, FL 33511 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. 01-05-2006 Abdullah Ghardi, vice President Honzed SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE; Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE GHAEDI, ABDULLAH STREET ADDRESS 28419 GREAT BEND PL. CITY-ST-ZIP WESLEY CHAPEL, FL 33543 TITLE GHAEDI, ROBAB 28419 GREAT BEND PL. STREET ADDRESS WESLEY CHAPEL, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS TO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Fiorida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 7-2-06

Women's Diagnostic Genter

Oakfield Business Center • 1357 Oakfield Drivé • Brandon, Florida 33511 • (813) 684-5144

ACCREDITED BY THE AMERICAN COLLEGE OF RADIOLOGY
Board Certified Radiologists

July 3, 2006

FLORIDA DEPATMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

Please be advised that we did file the annual report on January 5, 2006 sending the check for the amount \$150.00 which you received and cashed. When I received this notice of Intent to Dissolve, I called and talked to one of your representatives. I was told that a rejection letter had been sent to me after your received the form with the payment. The reason was I had forgotten to sign the form. But I never received the rejection letter.

Since we digitize all our documents, I reprinted the form which I had sent you on January 2006 which now I send you with my signature. Therefore, you are kindly requested to waive the \$400.00 charge.

Thank you,

Sincerely,

Abdullah Ghaedi, Vice President

A. A negative x-ray report should not delay biopsy if a dominant or clinically suspicious mass is present. 8-10 percent of cancers are not identified by x-ray.

B. Mammography as a screening examination is not appropriate for use in women who have breast symptoms such as a lump or an ahnormal discharge from the nipple. These women need to have a more comprehensive examination.

Adenosis and dense breasts may obscure an underlying neoplasm.

D. False positive reports average 6-10 percent.