## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCUMENT # P99000007801  1. Entity Name DIAGNOSTIC IMAGE OF AMERICA, INC.	Secretary of State
Principal Place of Business	
DO NOT WRITE IN THIS SPA	04182005 No Chg-P CR2E034 (10/03)
ALMEIDA, YVETTE 8000 W FLAGLER ST. SUITE 201 MIAMI, FL 33144	DO NOT WRITE IN THIS SPACE
8. The above named entity submits this systement 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.  SIGNATURE  Signature for the state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with, and accept the obligations of registered agent. The state of Florida is an familiar with accept the obligations of registered agent. The state of Florida is an familiar with accept the obligations of registered agent. The state of Florida is an familiar with accept the obligation of registered agent. The state of Florida is an familiar with accept the obligation of registered agent. The state of Florida is an familiar with accept the obligation of registered agent. The state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with accept the state of Florida is an familiar with acc	
FILE NOW!!! FEE 18 \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campalgn Finar Trust Fund Contribution.	ncing \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS  DITLE D NAME ALMEIDA, YVETTE STREET ADDRESS 8000 W. FLAGLER ST., STE 201 CITY-ST-ZIP MIAMI, FL. 33144  TITLE	U00000353613 ———————————————————————————————————
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST-ZIP	IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY - ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida 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 attackment with an address, with all other like empowered	