## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V44135

FILED Apr 08, 2009 Secretary of State

Entity Name: DIAGNOSTIC ULTRASOUND CENTER COMPANY

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
310 NW 1 MIAMI, FL	36TH AVE 33182			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
310 NW 1 MIAMI, FL	36TH AVE 33182			
FEI Number	: 65-0343039	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
	RACLEY			
310 NW 1 MIAMI, FL The above	36TH AVE 33182 US		purpose of changing its registere	ed office or registered agent, or both,
310 NW 1 MIAMI, FL The above	36TH AVE 33182 US e named entity e of Florida.		purpose of changing its registere	d office or registered agent, or both,
310 NW 1 MIAMI, FL The above in the Stat	36TH AVE 33182 US a named entity e of Florida. RE:			ed office or registered agent, or both,  Date
310 NW 1 MIAMI, FL The above in the Stat SIGNATU	36TH AVE 33182 US e named entity e of Florida.  RE: Electro	submits this statement for the		
310 NW 1 MIAMI, FL The above in the Stat SIGNATU  Election Ca	36TH AVE 33182 US e named entity e of Florida.  RE: Electro	submits this statement for the notes of the notes of Registered Agong Trust Fund Contribution ( ).	ent	
310 NW 1 MIAMI, FL The above in the Stat SIGNATU  Election Ca	36TH AVE 33182 US e named entity e of Florida.  RE: Electro mpaign Financir S AND DIREC	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution ( ).  CTORS:  ) Delete ELY	ent	Date

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.

SIGNATURE: ARACELY LOPEZ P 04/08/2009