

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023912

Entity Name: UNIVERSITY MRI LEASING, LLC

Current Principal Place of Business:

3848 FAU BLVD., SUITE 200
BOCA RATON, FL 33431

Current Mailing Address:

3848 FAU BLVD., SUITE 200
BOCA RATON, FL 33431

FEI Number: 80-0073925

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEINBERG, FRED LM.D.
2581 N.W. 59TH STREET
BOCA RATON, FL 33496 US

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

Authorized Person(s) Detail :

Title MGRM
Name STEINBERG, FRED
Address 2581 N.W. 59 ST
City-State-Zip: BOCA RATON FL 33496

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRED STEINBERG MD

MANAGER

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date