

No. W 56786

Due no later than December 31, 2008  
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:  
SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

MOUNTAIN MRI, LLC  
700 IRONWOOD DR #110  
COEUR D ALENE, ID 83815ALBERT J MARTINEZ MD  
700 IRONWOOD DR #110  
COEUR D ALENE, ID 83815NO FILING FEE IF  
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office heldNameStreet or P.O. AddressCityStateZip

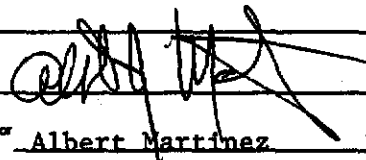
Managing Member - Albert Martinez, M.D. - 700 Ironwood Dr., Coeur d'Alene, ID 83815

5. Organized Under the Laws of:

IDAHO  
W 56786

6.

Signature



Date

11/25/08

Name  
(Typed or  
Printed)

Albert Martinez

Title Managing Member

Issued 10/01/2008

Do Not Tape or Staple

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