State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 • **Filing Fee: $50.00*** - **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

** In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of $25.00.*

1. ID No.	2. Exact name of the limited liability company		
122685	Rhode Island PET Services, LLC		
3. State of Formation: Rhode Island	4. Brief description of the character of the business which is actually conducted in Rhode Island: To acquire, maintain and operate a mobile positron emission tomography (PET) scanner.		
5. Principal office address: 600 Federal Street	City: Andover	State: MA	Zip: 01810

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title		
Richard A. Jones			
Street Address: 100 Bayview Circle, Suite 400	City: Newport Beach	State: CA	Zip: 92660

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☒

Manager Name	Street Address	City	State	Zip
Minal Amin	Alliance Imaging, Inc., 100 Bayview Circle, Suite 400	Newport Beach	CA	92660
Kristen Osborn	Alliance Imaging, Inc., 100 Bayview Circle, Suite 400	Newport Beach	CA	92660
Richard A. Jones	Alliance Imaging, Inc., 100 Bayview Circle, Suite 400	Newport Beach	CA	92660
Louis Masella	Alliance Imaging, Inc., 100 Bayview Circle, Suite 400	Newport Beach	CA	92660

8. RESIDENT AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

[redacted] 122685

FILED

File Date: OCT 18 2011
Check No.:
By: BY 108004438
FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

10/13/11
Signature of Authorized Person *Date*

[redacted]

Richard A. Jones
Print or Type Name of Authorized Person

Form 632 Rev. 08/08