

Mariano de Socarras
Centro Braquiterapia Avanzada
P.O. Box 16667
San Juan, PR 00908-6667 *NMSBL*

June 22, 2007

Regional Administrator, Region II
U.S. NRC
475 Allendale Road
King of Prussia, PA 19406

52-25591-01
03036003

RE: Change of ownership and address location

Dear Sir or Madam:

Attached you will find a change of ownership to Centro de Braquiterapia. In addition to the change of ownership, the physical location of the main office will be moved to the following location:

Physical location (records and storage):
Centro Braquiterapia Avanzada
Domenech Ave.
500 Suite 503
San Juan, PR 00918

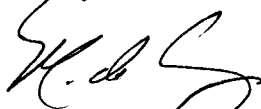
Mailing address:
Centro Braquiterapia Avanzada
P.O. Box 16667
San Juan, PR 00908-6667

2007 JUN 25 AM 10:33
RECEIVED
REGION I

Please place this license as storage only and this list to certify that there are no I-125 seeds on hand. Future locations (where the I-125 seeds will be used and implanted) will be added at a later date.

Please remove all room location at Caribe Medical Center. Only seed sources were used at this location and all have been either used or returned for disposal while within current leak test.

Sincerely,



Mariano de Socarras

140713

"INFORMATION NEEDED FOR CHANGE OF CONTROL"

Definitions:

Control: Control of a license is in the hands of the person or persons who are empowered to decide when and how that license will be used. That control is to be found in the person or persons who, because of ownership or authority explicitly delegated by the owners, possess the power to determine corporate policy and thus the direction of the activities under the license.

Transferee: A transferee is an entity that proposes to purchase or otherwise gain control of a U.S. Nuclear Regulatory Commission-licensed operation.

Transferor: A transferor is an NRC licensee selling or otherwise giving up control of a licensed operation.

Information Needed for Transfer of Control

Licensees must provide full information and obtain prior written consent before transferring control of the license. Provide the following information concerning changes of control by the applicant (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Provide a complete description of the transaction (transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a licensee contact whom the NRC may contact if more information is needed.

The Caribbean Medical Center will no longer own or operate the NRC Radioactive Material License. The hospital will lease the area to Centro de Braquiterapia Avanzada, Inc. Centro de Braquiterapia Avanzada, Inc. will be the new owner of the NRC Radioactive Material License.

Caribbean Medical Center NRC 52-2~~X~~5591-01
sub

New Owner

Name and street addresses:

a) Mailing address

Mariano de Sacarras
Centro de Braquiterapia Avanzada, Inc
Domenech Ave.
500 Suite 503
San Juan, PR 00918
787-767-1780
Fax 787-274-1851

b) Main Office address and physical location (storage/location of the radiation sources & records)

Mariano de Sacarras
Centro de Braquiterapia Avanzada, Inc
Domenech Ave.
500 Suite 503
San Juan, PR 00918
787-767-1780
Fax 787-274-1851

2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel.

No change to the program. The authorized users and RSO will remain the same.

Please add as an authorized user Nayda Figueroa Valles and Pedro Morales Hernandez. Currently listed on NRC license 52-21325-01.

3. Describe any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.

No change to the program. The facility's location, procedures and equipment will remain the same.

Please add Bard Brachytherapy, Inc. as a supplier of the I-125 seeds. Model # STM1251

4. Describe the status of the surveillance program (surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.

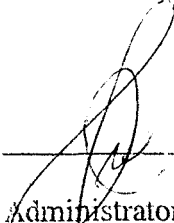
The program is currently inactive. However, all of the surveillance programs are following NRC regulations and will be maintained until the transfer is complete.

5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include documentation of surveys of ambient radiation levels, and fixed and/or removable contamination, including methods and sensitivity.

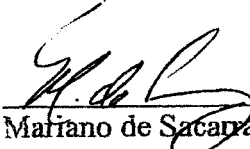
All records concerning the facility will be transferred to the transferee. These records will include the documentation of surveys of ambient radiation levels, and fixed and/or removable contamination, including methods and procedures.

6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor, or that the transferee will submit a complete description of the proposed licensed program.

NuMedic Global will abide by all constraints, conditions, requirements and commitments of the current license.



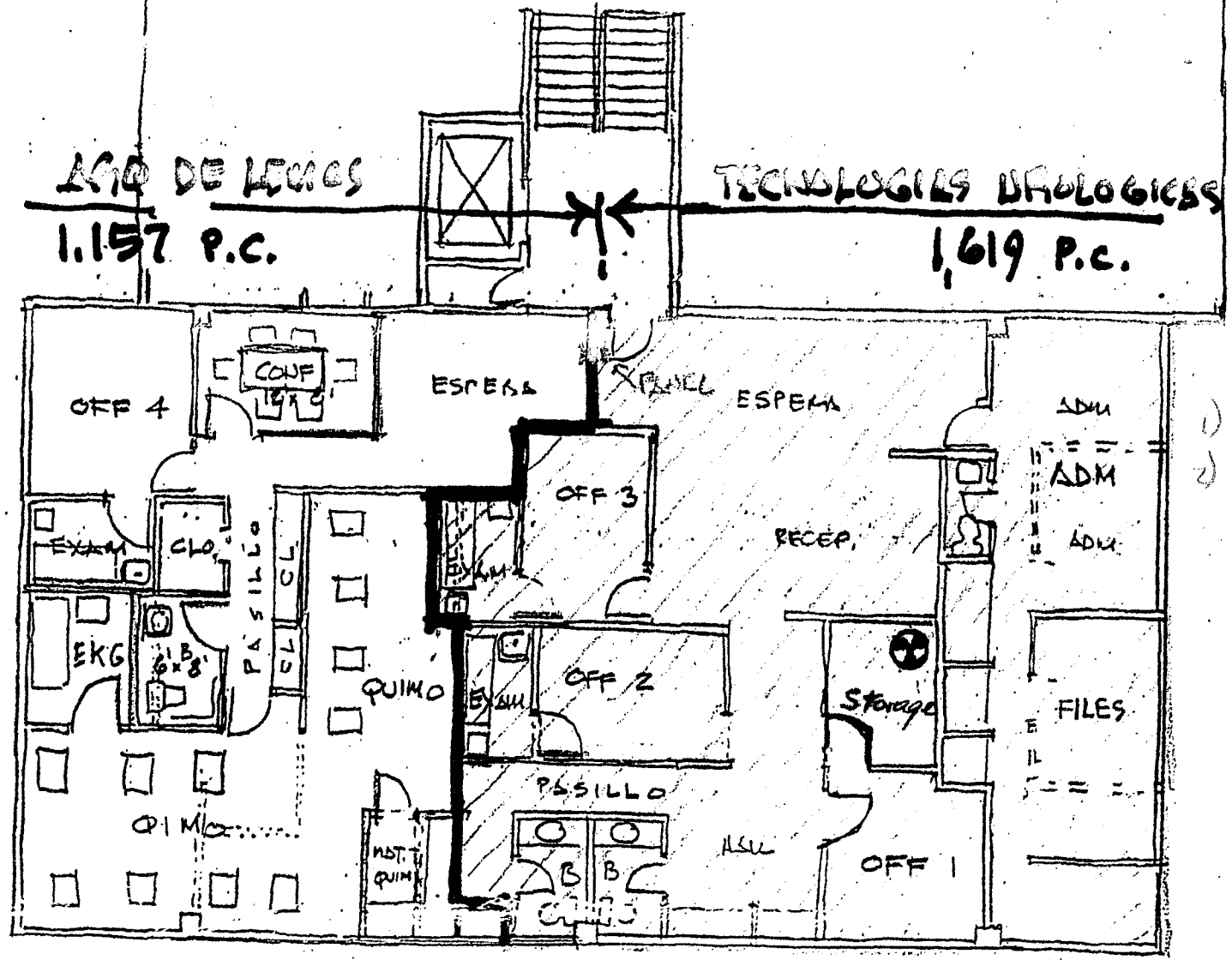
Administrator
Caribe Medical Center



Mariano de Sacarras
Administrator
Centro de Braquiterapia Avanzada, Inc

_____ *DMA*

Centro Braquiterapia
 Domenech Avenue
 500 Suite 503
 San Juan, PR



- 1) Storage location
- 2) location of record

PLANTA ESCALA APROX 1/8" = 1'-0"
 AMPLIACION PROPUESTA OFF DR PERDOMO

W 27 1999
 REV 18 22 1999

This is to acknowledge the receipt of your letter/application dated

6/22/2007, and to inform you that the initial processing which includes an administrative review has been performed.

- AMEND. 52-25591-01 There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

- Please provide to this office within 30 days of your receipt of this card
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A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned Mail Control Number 140713.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.