

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019182

FILED
Jan 04, 2005
Secretary of State

Entity Name: MEDICAL B & T SERVICES, LLC

Current Principal Place of Business:

2595 TAMPA ROAD
SUITE E
PALM HARBOR, FL 34684 US

New Principal Place of Business:

34041 US HIGHWAY 19 N
STE A
PALM HARBOR, FL 34684 US

Current Mailing Address:

2595 TAMPA ROAD
SUITE E
PALM HARBOR, FL 34684 US

New Mailing Address:

34041 US HIGHWAY 19N
STE A
PALM HARBOR, FL 34684 US

FEI Number: 57-1169135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAUNK, JAWAHAR L
2595 TAMPA ROAD
SUITE E
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

TAUNK, JAWAHAR L
34041 US HIGHWAY 19 N
STE A
PALM HARBOR, FL 34684 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: JAWAHAR L TAUNK

01/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TAUNK, JAWAHAR L
Address: 4050 PRESIDENTIAL DRIVE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGR () Delete
Name: TAUNK, VIJAY L
Address: 4050 PRESIDENTIAL DRIVE
City-St-Zip: PALM HARBOR, FL 34685 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JAWAHAR L TAUNK

MGRM

01/04/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date