

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009155

FILED
Jan 08, 2008
Secretary of State

Entity Name: UROLOGY SPECIALTY GROUP, LLC

Current Principal Place of Business:

132 MINORCA AVE
ATTN: JOSE E. SMITH, CONTROLLER
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

132 MINORCA AVE.
ATTN: JOSE E. SMITH
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-0658451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JOSE E
132 MINORCA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: BONDHUS, MARVIN J
Address: 132 MINORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: DIR () Delete
Name: GOMEZ, COSME
Address: 132 MINORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: DIR () Delete
Name: MASEL, JONATHAN
Address: 132 MINORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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

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 exemption stated in Chapter 119, 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: MARVIN J BONDHUS PRES 01/08/2008

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