

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074711

FILED
Feb 16, 2007
Secretary of State

Entity Name: GASTRO PHYSICIANS ENTERPRISES , LLC

Current Principal Place of Business:

260 LOOKOUT PLACE
SUITE # 201
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

1101 N MAITLAND AVE
SUITE # 2
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 55-0906062 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HILAL, NADIA A
1101 N MAITLAND AVE
SUITE #2
MAITLAND, FL 32751 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: MGRM () Delete
Name: NATH ENTERPRISES LLC,
Address: 160 N SPRING LAKE DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR () Delete
Name: WLT ENTERPRISES, LLC,
Address: 1790 SUMMERLAND AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NATH ENTERPRISE LLC,
Address: 160 N SPRING LAKE DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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 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: TALAL E HILAL

MGR

02/16/2007

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