

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044331

FILED
May 14, 2007
Secretary of State

Entity Name: MEDICAL CONCIERGE CONCEPTS, LLC

Current Principal Place of Business:

600 HERITAGE DRIVE, SUITE 100
JUPITER, FL 33458

New Principal Place of Business:

7108 FAIRWAY DRIVE
STE 205
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

600 HERITAGE DRIVE, SUITE 100
JUPITER, FL 33458

New Mailing Address:

FEI Number: 20-4802888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BERKOWITZ, IAN M
2385 EXECUTIVE CENTER DR., STE 190
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

DANILES, ALYS N
701 US HWY. ONE
STE 402
NORTH PALM BEACH, FL 33408 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: ALYS NAGLER DANIELS

05/14/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BIOKINETEX, LLC,
Address: 600 HERITAGE DRIVE, SUITE 100
City-St-Zip: JUPITER, FL 33458

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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Title: () Delete
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Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BIOKINETEX, LLC,
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: PCEO () Change (X) Addition
Name: SPECTOR, AARON H
Address: 600 HERITAGE DR, STE 110
City-St-Zip: JUPITER, FL 33458

Title: VPS () Change (X) Addition
Name: REED, MICHAEL L
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VPT () Change (X) Addition
Name: LOPPERT, DAVID A
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Change (X) Addition
Name: AMBROSE, FRANKLIN W
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: DAVID A. LOPPERT

VPT

05/14/2007

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