2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2007
Secretary of State

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Entity Name: CRAIG PELLER, M.D., LLC

Current Principal Place of Business:

8251 WEST BROWARD BLVD., SUITE 302
PLANTATION, FL 33324

New Principal Place of Business:

7351 WEST OAKLAND PARK BLVD
SUITE 103
LAUDERHILL, FL 33319

Current Mailing Address:

8251 WEST BROWARD BLVD., SUITE 302
PLANTATION, FL 33324

New Mailing Address:

7351 WEST OAKLAND PARK BLVD
SUITE 103
LAUDERHILL, FL 33319

FEI Number: 20-3207949 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PELLER, CRAIG M.D.
8251 WEST BROWARD BLVD., SUITE 302
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

PELLER, CRAIG M.D.
7351 WEST OAKLAND PARK BLVD
SUITE 103
LAUDERHILL, FL 33319 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: _____ 01/22/2007
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GASTROCARE, LLP,
Address: 2902 N. UNIVERSITY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

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: CRAIG PELLER, MD RA 01/22/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date