

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000006464

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** MIAMI DADE PRIMARY CARE, LLC

**Current Principal Place of Business:**

3181 CORAL WAY 4TH FLOOR  
MIAMI, FL 33145

**New Principal Place of Business:**

3181 CORAL WAY 4TH FLOOR  
4TH FLOOR  
MIAMI, FL 33145

**Current Mailing Address:**

3181 CORAL WAY 4TH FLOOR  
MIAMI, FL 33145

**New Mailing Address:**

3181 CORAL WAY 4TH FLOOR  
4TH FLOOR  
MIAMI, FL 33145

FEI Number: 26-4097717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SACHER, CHARLES P  
2655 LEJEUNE ROAD, SUITE 1101  
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: MGR  
Name: CARRILLO, RAMON M.D.  
Address: 3181 CORAL WAY 4TH FLOOR  
City-St-Zip: MIAMI, FL 33145

Title: MGR  
Name: GONZALEZ, RAYDA N.P.  
Address: 3181 CORAL WAY 4TH FLOOR  
City-St-Zip: MIAMI, FL 33145

I hereby 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: RAMON CARRILLO MD

MGR

01/04/2012

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