

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000448

Entity Name: UROLOGY SPECIALISTS, LLC

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

7100 WEST 20TH AVENUE
SUITE 111
HIALEAH, FL 33016

Current Mailing Address:

7100 WEST 20TH AVENUE
SUITE 111
HIALEAH, FL 33016

FEI Number: 20-0646908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

2140 W 68TH STREET
SUITE 200
HIALEAH, FL 33016 US

New Mailing Address:

132 MINORCA AVENUE
JOSE SMITH
CORAL GABLES, FL 33134 US

Name and Address of Current Registered Agent:

KLOPUKH, BORIS M.D.
7100 WEST 20TH AVENUE
SUITE 111
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI
250 AUSTRALIAN AVENUE
SUITE 500 (JAF)
WEST PALM BEACH, FL 33401 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: JAMES FARRELL, ESQ

04/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KLOPUKH, BORIS M.D.
Address: 7100 WEST 20TH AVE, STE 111
City-St-Zip: HIALEAH, FL 33016

Title: MGR () Delete
Name: GHEILER, EDWARD L M.D.
Address: 7100 WEST 20TH AVE, STE 111
City-St-Zip: HIALEAH, FL 33016

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

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: GOMEZ, COSME MD
Address: 132 MINORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP (X) Change () Addition
Name: GHEILER, EDWARD MD
Address: 132 MINORCA AVENUE
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP () Change (X) Addition
Name: KLOPUKH, BORIS MD
Address: 132 MINORCA AVENUE
City-St-Zip: CORAL GABLES, F 33134 US

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: COSME GOMEZ

PRES

04/10/2009

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