2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 29, 2009
Secretary of State

DOCUMENT# L04000054440

Entity Name: PALM BEACH INTERNAL MEDICINE, LLC

Current Principal Place of Business:

3401 PGA BOULEVARD
#330
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

3401 PGA BOULEVARD
#430
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3401 PGA BOULEVARD
#330
PALM BEACH GARDENS, FL 33410

New Mailing Address:

3401 PGA BOULEVARD
#430
PALM BEACH GARDENS, FL 33410

FEI Number: 33-1096450 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

HALICKMAN, DOREEN BONADIE
102 OLIVERA WAY
PALM BEACH GARDENS, FL 33418 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 ( ) Delete
Name: DHARIA, RUPESH R M.D.
Address: 11700 LANDING PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

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 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: R.R.DHARIA MGR 06/29/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date