

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112720

FILED
Jan 20, 2012
Secretary of State

Entity Name: PHYSICIANS HEALTHCARE SYSTEMS, LLC

Current Principal Place of Business:

7800 WEST OAKLAND PARK BLVD.
E-214
SUNRISE, FL 33351

New Principal Place of Business:

7800 WEST OAKLAND PARK BLVD.
E-214
SUNRISE, FL 33351 US

Current Mailing Address:

7800 WEST OAKLAND PARK BLVD.
E-214
SUNRISE, FL 33351

New Mailing Address:

7800 WEST OAKLAND PARK BLVD.
E-214
SUNRISE, FL 33351 US

FEI Number: 20-8136560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DI CAPUA, JOSEPH J
7800 WEST OAKLAND PARK BLVD.
E-214
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

MJM BUSINESS ENTERPRISES, INC.
7800 WEST OAKLAND PARK BLVD.
E-214
SUNRISE, FL 33351 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: MANUEL GONZALEZ

01/20/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: RA
Name: MJM BUSINESS ENTERPRISES, INC.
Address: 7800 WEST OAKLAND PARK BLVD. SUITE E-214
City-St-Zip: SUNRISE, FL 33351 US

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: MANUEL GONZALEZ

MGRM

01/20/2012

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