

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000023041

FILED
Apr 15, 2012
Secretary of State

Entity Name: ANTHONY SOLAGES AND INFECTIOUS DISEASE ASSOCIATES, LLC.

Current Principal Place of Business:

2400 N UNIVERSITY DRIVE
SUITE 215
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

4745 SW 148TH AVE
SUITE 301
DAVIE, FL 33330 US

Current Mailing Address:

PO BOX 292523
DAVIE, FL 33329 US

New Mailing Address:

FEI Number: 26-4216161 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SOLAGES, ANTHONY
2400 N UNIVERSITY DRIVE
SUITE 215
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

SOLAGES, ANTHONY
4745 SW 148TH AVE
SUITE 301
DAVIE, FL 33330 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: _____

Electronic Signature of Registered Agent

04/15/2012

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SOLAGES, ANTHONY
Address: PO BOX 292523
City-St-Zip: DAVIE, FL 33329 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: ANTHONY SOLAGES

MGR

04/15/2012

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