2012 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A95000001638

Entity Name: FLORIDA INSTITUTE OF HEALTH, LTD., L.L.L.P.

FILED Mar 21, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4850 WEST OAKLAND PARK BLVD. 4850 WEST OAKLAND PARK BLVD.

SUITE #205 SUITE #203

LAUDERDALE LAKES, FL 333137260 LAUDERDALE LAKES, FL 333137260

Current Mailing Address: New Mailing Address:

4850 WEST OAKLAND PARK BLVD. 4850 WEST OAKLAND PARK BLVD.

SUITE #205 SUITE #203

LAUDERDALE LAKES, FL 333137260 LAUDERDALE LAKES, FL 333137260

FEI Number: 65-0374059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HART, BRIAN A
255 ALHAMBRA CIR., SUITE 850
CORAL GABLES, FL 33134 US
HART, BRIAN A
799 BRICKELL PLAZA
SUITE 900
MIAMI, FL 331131 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: 03/21/2012

Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #: 545547

Name: DANIEL KESDEN, MD, PA

Address: 4850 W. OAKLAND PARK BLVD. #209 Address: City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip:

Document #: F63924

Name: DANIEL E. MARCUS, MD, PA

 Address:
 7646 NOB HILL ROAD
 Address:

 City-St-Zip:
 TAMARAC, FL 33321
 City-St-Zip:

Document #: P92000015323

Name: DAUER FIH RADIOLOGY ASSOCIATES, PA

 Address:
 4850 W. OAKLAND PARK BLVD. #145
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33313
 City-St-Zip:

Document #: P04000124892

Name: EDWARD D. HIRSCH MD, P.A.

 Address:
 2951 NW 49TH AVE - STE 205
 Address:

 City-St-Zip:
 LAUDERDALE LAKES, FL 33313
 City-St-Zip:

Document #:

Name: GREENE, RYAN MD PHD

Address: 4900 W OAKLAND PARK BLVD., SUITE 300 Address: City-St-Zip: LAUDERDALE LAKES, FL 333137260 City-St-Zip:

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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: AVA ZAKEN CEO 03/21/2012