2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

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DOCUMENT # A98000001115

1. Entity Name
MEDICAL MALL ASSOCIATES OF MARTIN COUNTY, LTD.



FILED Apr 11, 2007 08:00 A Secretary of State

Principal Place of Business 3766 S.E. OCEAN BLVD. STUART, FL 34996

Mailing Address

3766 S.E. OCEAN BLVD. STUART, FL 34996



03192007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 65-0844601

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, WILLIAM F 3766 S.E. OCEAN BLVD. STUART, FL 34996

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	named entity submits this statement for the purpose of changing its reions of registered agent.	gistered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and little if applicable		DATE .
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.	00	U00000701056
	A GENERAL PARTNER THAT IS A BUSINESS ENT NOTE: General Partners MAY NOT be changed on the		
12.	GENERAL PARTNER INFORMATION	5.20.15 (A.1.15) (A.	
DOCUMENT #	P98000031843		
NAME	HASAMEL, INC.		
STREET ADDRESS	3766 S.E. OCEAN BLVD.		
CITY-ST-ZIP	STUART, FL 34996		
DOCUMENT #			
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STREET ADDRESS CITY-ST-719 DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath: that I am a General Partner of the limited nationarching.

SIGNATURE