2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2006
Secretary of State

DOCUMENT# L00000001540

Entity Name: SOUTH BROWARD HOSPITALISTS, P.L.

Current Principal Place of Business:

2470 SW 131 TERRACE
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

2470 SW 131 TERRACE
DAVIE, FL 33325

New Mailing Address:

FEI Number: 65-0990949 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAM, ROSA
2470 SW 131 TERRACE
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

TAM, ROSA
2470 SW 131 TERRACE
DAVIE, FL 33325 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: ROSA TAM 03/28/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: TAM, ROSA
Address: 2470 SW 131 TERRACE
City-St-Zip: DAVIE, FL 33325

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 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: ROSA TAM MGRM 03/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date