

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90257 027 ****50.00

DOCUMENT # L00000014938

1. Entity Name

MEDICAL PARK ENTERPRISES, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 132 Whitaker Rd. Suite, Apt. #, etc. Suite #A City & State Brandon, FL Zip 33511 Country U.S.		3. Mailing Address P.O. Box 272046 Suite, Apt. #, etc. City & State TAMPA, FL Zip 33688 Country U.S.	
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4. FEI Number 59-3689477	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FEE IS \$50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TYLER D. REISER 132 Whitaker Rd, Ste #A Lutz, FL 33688	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREG VAN BEEBEN 132 Whitaker Rd, Ste #A Lutz, FL 33688	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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: Tyler D. Reiser, Managing Member Date: 4/28/02 (913) 909-1819
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CR2E083B (12/01)