

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90149 004 ***143.75

DOCUMENT # L01000007664					
1. Entity Name SOUTH TAMPA MEDICAL INVESTMENTS, LLC					
Principal Place of Business 214 KEAP STREET BROOKLYN, NY 11211			Mailing Address 3928 PREMIER NORTH DRIVE TAMPA, FL 33618		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3722197	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent			
CIMLINK REAL ESTATE SERVICES, L.C. 3928 PREMIER NORTH DRIVE TAMPA, FL 33624		Name <u>Eric N. Appleton</u> Street Address (P.O. Box Number is Not Acceptable) <u>1801 W. Highland Ave.</u> City <u>Tampa</u> <u>FL</u> Zip Code <u>33602</u>			
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Eric N. Appleton, Esq.</u> DATE <u>3/12/08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GROSZ, JUDITH 214 KEAP ST BROOKLYN, NY 11211	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEFKOWITZ, MORRIS 570 BEDFORD AVENUE BROOKLYN, NY 11211	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEFKOWITZ, EDWARD 5511 11TH AVE BROOKLYN, NY 11219	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHACHTER, ROBERT 1670 50TH ST BROOKLYN, NY 11219	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GOLD, HARRY 1745 45TH ST BROOKLYN, NY 11219	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEFKOWITZ, JACOB 125 TAYLOR ST BROOKLYN, NY 11211	<input type="checkbox"/> Delete			
11. 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 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: <u>Judy Gross</u> <u>Judy Gross</u> <u>4/1/08</u> <u>718-522-6500</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		