

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007666

FILED
Feb 03, 2009
Secretary of State

Entity Name: ENDOSCOPY PARTNERS, L.L.C.

Current Principal Place of Business:

5101 S.W. 8TH STREET
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

8950 N. KENDALL DR. #306
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-1144123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURZWELIL, HOWARD E ESQ
101 NORTHEAST THIRD AVE.
TOWER 101, SUITE 1700
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HERNANDEZ, MOISES E M.D.
Address: 4800 S.W. 8 STREET
City-St-Zip: MIAMI, FL 33134

Title: MGRM () Delete
Name: FERRER, JOSE PORFIRIO
Address: 4800 S.W. 8TH STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: BEHAR, SIMON
Address: 8950 N. KENDALL DR., SUITE 306
City-St-Zip: MIAMI, FL 33176

Title: MGRM () Delete
Name: HERNANDEZ, EUGENIO
Address: 8950 N. KENDALL DR., SUITE 306
City-St-Zip: MIAMI, FL 33176

Title: MGRM () Delete
Name: VELOSO, ANGEL
Address: 5101 SW 8TH STREET
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HERNANDEZ, MOISES E M.D.
Address: 8950 N. KENDALL DR. #306
City-St-Zip: MIAMI, FL 33176

Title: MGRM (X) Change () Addition
Name: FERRER, JOSE PORFIRIO
Address: 8950 N. KENDALL DR. #306
City-St-Zip: CORAL GABLES, FL 33176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SIMON BEHAR

MGRM

02/03/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date