2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011682

Entity Name: SOLOMON & SOLOMON MEDICAL CLINIC LLC

FILED Apr 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1600 N. STATE ROAD 7 LAUDERHILL, FL 33313 1600 N. STATE ROAD 7 SUITE 200

LAUDERHILL, FL 33313

Name and Address of New Registered Agent:

Current Mailing Address: New Mailing Address:

1600 N. STATE ROAD 7 LAUDERHILL, FL 33313 1600 N. STATE ROAD 7 SUITE 100 LAUDERHILL, FL 33313

FEI Number: 65-0905871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

SOLOMON, VALERIE T 14500 LURAY ROAD SOUTHWEST RANCHES, FL 33330

Name and Address of Current 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: ADDITIONS/CHANGES:

US

Title: MGR () Delete Title: () Change () Addition

 Name:
 SOLOMON, IRWIN
 Name:

 Address:
 14500 LURAY ROAD
 Address:

 City-St-Zip:
 SOUTHWEST RANCHES, FL 33330
 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: VALERIE SOLOMON MD 04/03/2006