

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004923

Entity Name: JOHN D. OLIVIER, PLLC

FILED
Jan 22, 2006
Secretary of State

Current Principal Place of Business:

C/O HCRM CORP.
2200 CORPORATE BLVD. NW, SUITE 401
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

C/O HCRM CORP.
2200 CORPORATE BLVD. NW, SUITE 401
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HCRM COPR.
2200 CORPORATE BLVD. N.W.
SUITE 401
BOCA RATON, FL 33431 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: MGR () Delete
Name: OLIVIER, JOHN D
Address: 1901 N. OCEAN BLVD., APT 8B
City-St-Zip: FORT LAUDERDALE, FL 33305 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OLIVIER, JOHN D
Address: 3100 N. OCEAN BLVD., APT 2404
City-St-Zip: FORT LAUDERDALE, FL 33308 US

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: JOHN D. OLIVIER

MR.

01/22/2006

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