

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006767

Entity Name: MARIO F. MOQUETE, M.D., LLC

FILED
Jun 30, 2005
Secretary of State

Current Principal Place of Business:

1610 WOODWARD ST.
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 421870
KISSIMMEE, FL 34742

New Mailing Address:

FEI Number: 75-3029941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MOQUETE, MARIO F
14316 FREDRICKSBURG DR
#519
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

MOQUETE, MARIO F
8361 VIA ROSA
ORLANDO, FL 32836 US

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

06/30/2005

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOQUETE, MARIO F
Address: 14316 FREDRICKSBURG DR. #519
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOQUETE, MARIO F
Address: 8361 VIA ROSA
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIO F MOQUETE

MGR

06/30/2005

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