## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000007424

Name:

Address:

City-St-Zip:

Entity Name: MIAMI EMERGENCY MEDICINE SPECIALISTS, L.C.

FILED Apr 25, 2003 Secretary of State

Current P	rincipal Place o	of Business:	New Principal Place of Business:		
3900 HOLLYWOOD BLVD. SUITE 101 HOLLYWOOD, FL 33021			160 NW 170 ST NORTH MIAMI BEACH, FL 33169		
Current M	lailing Address	:	New Mailing Address:		
SUITE 101	LYWOOD BLVD DOD, FL 33021				
FEI Number	: 01-0646369	FEI Number Applied For ( )	FEI Number Not Applicable	e ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SUITE 101	LYWOOD BLVD				
	named entity sue of Florida.	ıbmits this statement for the ເ	ourpose of changing its reg	gistered office or registered agent, or bot	th
SIGNATUI	RE:				
	Electronic	Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MEMBERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MIAMI EMS, MM, 3900 HOLLYWO	OD BLVD. STE. 101	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	( )	Delete	Title: MGR	R ( ) Change (X) Addition	

Name:

Address:

City-St-Zip:

MEMS, TM, LC,

HOLLYWOOD, FL 33021

3900 HOLLYWOOD BLVD., STE. 101

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: STEVE STERN CFO 04/25/2003