## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010988

Entity Name: CORAZON DIAGNOSTICS, LLC

FILED Apr 01, 2012 Secretary of State

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

3340 TAMIAMI TRAIL 3340 TAMIAMI TRAIL ATTN: DIANE ATTN: DIANE

PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

PO BOX 495120 ATTN: DIANE

PT CHARLOTTE, FL 33952

FEI Number: 42-1537407 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CONNELLY, TERENCE P MD 3340 TAMIAMI TRAIL ATTN: DIANE G. PORT CHARLOTTE, FL 33952 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.

in the State of Florida

SIGNATURE:

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR

Name: LOPEZ, MARIO J MD Address: 3340 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGR

Name: CONNELLY, TERENCE P Address: 3340 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGR

Name: COSSU, SERGIO F MD
Address: 3340 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGR

 Name:
 MARTINEZ, RICARDO R MD

 Address:
 3340 TAMIAMI TRAIL

 City-St-Zip:
 PORT CHARLOTTE, FL 33952

Title: MGR

Name: MALONE, MICHAEL A D.O.
Address: 3340 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby 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 Statues.

SIGNATURE: MARIO J LOPEZ MGR 04/01/2012