


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 28, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000012134  
 1. Entity Name  
 MIGUEL A MONTEJO, M.D. PLC.



Principal Place of Business 2403 BERKSHIRE LANE WINTER HAVEN, FL 33884	Mailing Address 2403 BERKSHIRE LANE WINTER HAVEN, FL 33884
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**DO NOT WRITE IN THIS SPACE**



02122007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 03-0447280	Applied For Not Applicable
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5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MONTEJO, MIGUEL A  
 2403 BERKSHIRE LANE  
 WINTER HAVEN, FL 33884

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
 Due by May 1, 2007**

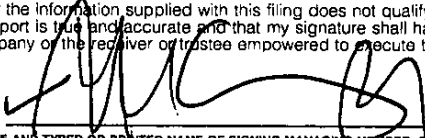
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 03/12/07-80009-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MONTEJO, MIGUEL A 2403 BERKSHIRE LANE WINTER HAVEN, FL 33884
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  DATE: 2/23/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #