2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

3

FILED
Apr 24, 2006 8:00 am
Secretary of State
03-01-2006 90221 013 ****50.00

DOCUMENT # L02000014778

1. Entity Name
SOUTH FLORIDA MULTISPECIALTY ASSOCIATES LLC

Principal Place of Business	Mailing Address
4300 ALTON ROAD SUITE 207 MIAMI BEACH, FL 33140	4300 ALTON ROAD SUITE 207 MIAMI BEACH, FL 33140

2. Principal Place of Business	3. Mailing Address
4300 Alton Road Ste. 2070	4300 Alton Road Ste. 2070
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Beach, FL	City & State: Miami Beach, FL
Zip: 33140 Country: Dade	Zip: 33140 Country: DADE

03202006 Chg-LLC CR2E083 (11/05)

4. FEI Number: 04-3699291 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CURRIER, MARIA
HUNTON & WILLIAMS
1111 BRICKELL AVENUE, SUITE 2500
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 date if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR WEINBERG, DENIS R 4300 ALTON ROAD #207 MIAMI BEACH, FL 33140	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mgr. REINBERG, JAY 3700 Island BLVD C102 Aventura, FL 33160	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR GARCIA, MIGUEL 4300 ALTON ROAD #207 MIAMI BEACH, FL 33140	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member FORSTER, ANDREW 1264 Aguila AVE Coral Gables, FL 33134	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LAMOS, Gervasio A. 141 CRANDON BLVD. #333 KEY BISCAYNE, FL 33149	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing member TOLENTINO, ALFONSO E 9401 SW 70TH AVENUE MIAMI, FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing member CICCIA-MACLEAN, ROBERT 441 WEST 62ND STREET MIAMI BEACH, FL 33140	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing member VAZQUEZ, JOSE L 8450 SW 48 Street Miami, FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ Mng. Member 3/30/06 (305) 695-0644
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #