

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023475

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: CLINIQUE MEDMANAGEMENT GROUP,LLC

## Current Principal Place of Business:

750 S. FEDERAL HWY  
HOLLYWOOD, FL 33020 US

## New Principal Place of Business:

## Current Mailing Address:

1720 HARRISON  
1725  
HOLLYWOOD, FL 33020 US

## New Mailing Address:

750 S. FEDERAL HWY  
HOLLYWOOD, FL 33020 US

FEI Number: 06-1660524

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERNSTEIN, JEFFREY  
100 NORTH BISCAYNE BLVD.  
2608  
MIAMI, FL 33132 US

## Name and Address of New Registered Agent:

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

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BACCHELLI, SANDRO  
Address: 750 S. FEDERAL HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR ( ) Delete  
Name: MECCIA, LOUIS F  
Address: 750 S. FEDERAL HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR ( ) Delete  
Name: COLEMAN, MARTIN  
Address: 750 S. FEDERAL HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR ( ) Delete  
Name: PEREZ, CHRISTOPHER  
Address: 750 S. FEDERAL HWY  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: MOCCIA, LOUIS F  
Address: 750 S. FEDERAL HWY  
City-St-Zip: HOLLYWOOD, FL 33020

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LOUIS MOCCIA

SEC

04/27/2006

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