

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026913

FILED
Jan 31, 2004
Secretary of State

Entity Name: MEDICAL HEALTH CENTER, LLC

Current Principal Place of Business:

3600 WEST FLAGLER STREET
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

3600 WEST FLAGLER STREET
MIAMI, FL 33135

New Mailing Address:

FEI Number: 26-5215373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
1600 MIAMI CENTER
201 SOUTH BISCAYNE BLVD.
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

PEREZ-ESPINOSA, MANUEL
3600 W FLAGLER ST
MIAMI, FL 33135 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.

SIGNATURE: MANUEL PEREZ-ESPINOSA

01/31/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PEREZ-ESPINOSA, MANUEL M.D.
Address: 3600 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PEREZ-ESPINOSA, MANUEL
Address: 3600 WEST FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

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: MANUEL PEREZ-ESPINOSA

MGR

01/31/2004

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