

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026922

FILED
Mar 05, 2004
Secretary of State

Entity Name: BEST MEDICAL, LLC

Current Principal Place of Business:

4900 PALM AVENUE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4900 PALM AVENUE
HIALEAH, FL 33012

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 BOULEVARD
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

PEREZ-ESPINOSA, MANUEL
4900 PALM AVE
HIALEAH, FL 33012 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

03/05/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PEREZ-EZPINS, MANUEL MD
Address: 3600 W. FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES:

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 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

MRG

03/05/2004

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