

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029358

FILED
Apr 20, 2004
Secretary of State

Entity Name: JERSEY SURGERY, P.L.

Current Principal Place of Business:

450 WEST HILLSBORO BOULEVARD
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

450 WEST HILLSBORO BOULEVARD
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 13-4220517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOEL KORNBERG, M.D., J.D., P.A.
7301-A WEST PALMETTO PARK ROAD, SUITE 305C
BOCA RATON, FL 33433 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/MEMBERS:

Title: MGR () Delete
Name: LEHR, GARY S M.D.P.A.
Address: 450 WEST HILLSBORO BOULEVARD
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR () Delete
Name: KIMMELMAN, RANDY S D.O.
Address: 450 WEST HILLSBORO BOULEVARD
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES:

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 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: RANDY S KIMMELMAN

MGR

04/20/2004

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