

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032790

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** WEST DADE PEDIATRICS, P.L.

**Current Principal Place of Business:**

3220 SW 107 AVE  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

3220 SW 107 AVE  
MIAMI, FL 33165

**New Mailing Address:**

**FEI Number:** 65-0380969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EGUSQUIZA, JOHN E ESQ  
9960 SW 40 ST  
MIAMI, FL 33165 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: MGRM  
Name: EGUSQUIZA, JULIO  
Address: 3220 SW 107 AVE.  
City-St-Zip: MIAMI, FL 33165

Title: MGRM  
Name: EGUSQUIZA, MARIA V  
Address: 3220 S.W. 107 AVE.  
City-St-Zip: MIAMI, FL 33165

I hereby 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: JULIO EGUSQUIZA

MGRM

01/12/2010

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