## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L02000034796**

1. Entity Name
U.S. BARIATRIC OFFICE SPECIALTY SERVICES, LLC.

| Principal Place of Business | Mailing Address |
|---|---|
| 4800 NE 20TH TERRACE, STE. 303 FORT LAUDERDALE, FL 33308 | 4800 NE 20TH TERRACE, STE. 303 FORT LAUDERDALE, FL 33308 |

### DO NOT WRITE IN THIS SPACE

**30005876**

03092005 No Chg - LLC          CR2E083 (10/03)

| 4. FEI Number | | Applied For |
|---|---|---|
| 06-1667092 | | Not Applicable |

5. Certificate of Status Desired ___ ☐ ___ **$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

ADAMO, TONY
4800 NE 20TH TERRACE, STE. 303
FORT LAUDERDALE, FL 33308

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.        (NOTE: Registered Agent signature required when reinstating)        DATE

**Filing Fee is $50.00**
**Due by May 1, 2005**

| 9. | MANAGING MEMBERS/MANAGERS | |
|---|---|---|
| TITLE | MGRM | |
| NAME | US BARIATRIC, LLC | |
| STREET ADDRESS | 4800 NE 20 TERRACE #303 | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33308 | |
| TITLE | | |
| NAME | | |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____          4/25/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE          Date          Daytime Phone #