

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011060

FILED  
Sep 01, 2006  
Secretary of State

Entity Name: ADVANCED GERIATRIC & INTERNAL MEDICINE, P.L.

**Current Principal Place of Business:**

2623 SOUTH SEACREST BLVD  
SUITE 100  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

2320 SOUTH SEACREST BLVD  
SUITE 200  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

2623 SOUTH SEACREST BLVD  
SUITE 100  
BOYNTON BEACH, FL 33435

**New Mailing Address:**

2320 SOUTH SEACREST BLVD  
SUITE 200  
BOYNTON BEACH, FL 33436

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

AHEARN, MATTHEW JOHN ESQ  
800 NORTH MAGNOLIA AVENUE, SUITE 1500  
ORLANDO, FL 32803 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 ( ) Delete  
Name: VELEZ-CORTES, SOL E  
Address: 2623 S. SEACREST BLVD SUITE 100  
City-St-Zip: BOYNTON BEACH, FL 33435

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VELEZ-CORTES, SOL E  
Address: 2320 S. SEACREST BLVD SUITE 200  
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SEV

MGR

09/01/2006

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