

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011294

FILED
May 03, 2010
Secretary of State

Entity Name: CARESERVICES OF CENTRAL FLORIDA, LLC

Current Principal Place of Business:

4407 VINELAND ROAD #D-16
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

2500 QUANTUM LAKES DRIVE, SUITE 108
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 47-0914818 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

HOCHHAUSER, MAXINE
2500 QUANTUM LAKES DRIVE
SUITE 108
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

HOCHHAUSER, MAXINE CEO
2500 QUANTUM LAKES DRIVE
SUITE 108
BOYNTON BEACH, FL 33426 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: MAXINE HOCHHAUSER

05/03/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MOBILE MEDICAL INDUSTRIES INC
Address: 2500 QUANTUM LAKES DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: CEO
Name: HOCHHAUSER, MAXINE
Address: 2500 QUANTUM LAKES DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

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: MAXINE HOCHHAUSER

CEO

05/03/2010

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