

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011313

FILED
Apr 15, 2009
Secretary of State

Entity Name: CARESERVICES OF THE PLATINUM COAST, LLC

Current Principal Place of Business:

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

New Principal Place of Business:

3200 BAILEY LANE
NAPLES, FL 34105

Current Mailing Address:

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

New Mailing Address:

FEI Number: 47-0914815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TODD, STEPHEN
2500 QUANTUM LAKES DRIVE,
SUITE 108
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

CAMMARATA, DANIEL
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: DANIEL CAMMARATA

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete
Name: TODD, STEPHEN
Address: 2500 QUANTUM LAKES DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: CFO () Delete
Name: CAMMARATA, DANIEL
Address: 2500 QUANTUM LAKES DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOBILE MEDICAL INDUSTRIES
Address: 2500 QUANTUM LAKES DRIVE, SUITE 108
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO () Change (X) Addition
Name: HOCHHAUSER, MAXINE
Address: 2500 QUANTUM LAKES DR #108
City-St-Zip: BOYNTON BEACH, FL 33426

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL CAMMARATA

CFO

04/15/2009

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