

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000020352

1. Entity Name

CORAL GABLES DIAGNOSTIC TESTING GROUP, L.L.C.



Principal Place of Business

**% HAROLD GOBSTEIN
1836 MONTE CARLO WAY
CORAL GABLES, FL 33071**

Mailing Address

**% HAROLD GOBSTEIN
1836 MONTE CARLO WAY
CORAL GABLES, FL 33071**



04252006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0083022

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEINBERG, STEVEN A ESQUIRE
FRANK, WEINBERG, & BLACK, PL
7805 SW 6TH COURT
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

6. 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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GOBSTEIN, HAROLD MR
STREET ADDRESS	1836 MONTE CARLO WAY
CITY-ST-ZIP	CORAL SPRINGS, FL 330717829
TITLE	MGRM
NAME	CIANGIULLI, STEPHEN E
STREET ADDRESS	1581 BRICKEL AVE. T-206
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000548986
05/13/06-80002-018 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Harold Gobstein, Harold Gobstein, LLC 4/26/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #