

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022275

FILED
Jul 29, 2004
Secretary of State

Entity Name: AZTEC MEDICAL SERVICES, LLC

Current Principal Place of Business:

6101 BLUE LAGOON DRIVE, SUITE 455
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

6101 BLUE LAGOON DRIVE, SUITE 455
MIAMI, FL 33126

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 336075736 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/MEMBERS:

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MADORSKY, MARTIN
Address: 6101 BLUE LAGOON DRIVE SUITE 455
City-St-Zip: MIAMI, FL 33126

Title: MGR () Change (X) Addition
Name: PINTAURO, WILLIAM
Address: 6101 BLUE LAGOON DRIVE SUITE 455
City-St-Zip: MAIMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARTIN MADORSKY MGR 07/29/2004

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