

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024001

FILED  
Jan 28, 2008  
Secretary of State

Entity Name: DAVID MALKEVICH, MD, P.L.

## Current Principal Place of Business:

1057 15TH ST  
#24  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

733 NW 23RD ST  
WILTON MANORS, FL 33311 US

## Current Mailing Address:

1057 15TH ST  
#24  
MIAMI BEACH, FL 33139 US

## New Mailing Address:

733 NW 23RD ST  
WILTON MANORS, FL 33311 US

FEI Number: 72-1568152      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALKEVICH, DAVID A MD  
333 LAS OLAS WAY  
SUITE 3607  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

MALKEVICH, DAVID A MD  
733 NW 23RD ST  
WILTON MANORS, FL 33311 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:

01/28/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MALKEVICH, DAVID A  
Address: 333 LAS OLAS WAY #3607  
City-St-Zip: FORT LAUDERDALE, FL 33301 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MALKEVICH, DAVID A  
Address: 733 NW 23RD ST  
City-St-Zip: WILTON MANORS, FL 33311 US

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: DAVID MALKEVICH

MGRM

01/28/2008

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