

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000025049

**Entity Name:** USA PATH LAB, LLC

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8900 N. ARMENIA AVENUE, SUITE 102  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

8900 N. ARMENIA AVENUE, SUITE 102  
TAMPA, FL 33604

**New Mailing Address:**

**FEI Number:** 54-2117286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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/MANAGERS:**

Title: MGR  
Name: KANDAWALLA, NARIOSANG M.M.D.  
Address: 8900 N. ARMENIA AVENUE, STE. 102  
City-St-Zip: TAMPA, FL 33604

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: NARIOSANG M. KANDAWALLA, M.D.

CEO

03/15/2011

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