

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027801

Entity Name: KMR HEALTHPLANS, LLC

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

5460 NORTH STATE ROAD 7, SUITE 224
FT. LAUDERDALE, FL 33319

New Principal Place of Business:

Current Mailing Address:

5460 NORTH STATE ROAD 7, SUITE 224
FT. LAUDERDALE, FL 33319

New Mailing Address:

FEI Number: 20-0118656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOBIAS, MICHAEL
5460 NORTH STATE ROAD 7, SUITE 224
FT. LAUDERDALE, FL 33319

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:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: TOBIAS, MICHAEL
Address: 5460 N ST. RD 7 SUITE 224
City-St-Zip: FORT LAUDERDALE, FL 33319

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: MICHAEL TOBIAS

MGR

04/26/2004

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