


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 14, 2006 8:00 am
Secretary of State

07-14-2006 90093 010 ****50.00

DOCUMENT # L03000028164	
1. Entity Name MEDICAL BUSINESS MANAGEMENT, LLC	

Principal Place of Business 500 VONDERBURG DRIVE, SUITE #203E BRANDON, FL 33511	Mailing Address 500 VONDERBURG DRIVE, SUITE #203E BRANDON, FL 33511
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20049122

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

07032006 Chg-LLC CR2E083 (11/05)	
4. FEI Number APPLIED FOR 200122653	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent	
NAGAMIA, HUSAIN F 500 VONDERBURG DRIVE, SUITE #203E BRANDON, FL 33511	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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	DATE

Filing Fee is \$50.00 Due by September 6, 2006	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NAGAMIA, HUSAIN F 500 VONDERBURG DRIVE, SUITE #203E BRANDON, FL 33511 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAGAMIA, ZUBEDA 500 VONDERBURG DRIVE # 2038 BRANDON, FL 33511 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: <u>Nagamia H. Nagamia</u> (H. NAGAMIA)	7/3/06 813-654-4466
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #

ATTACHMENT

20049122
#L03000028164

Husain F. Nagamia MD.FRCS,
500 Vonderberg Dr # 203 E,
Brandon FL 33511
Tel: 813-654-4466
Fax: 813-684-5500
Email hnagamia786@aol.com

June 21st 2006

To whom it may concern

Fraud Alert

One of our employees **Mr Andrew Giddens** was caught forging checks. He has been summarily dismissed from our service as a bookkeeper/accountant and we are no longer responsible for any transactions that he may endorse or try to perpetrate. He has been reported to Law enforcement and there is a warrant out for his arrest.

If he tries to contact you for any reason kindly call and report his whereabouts to the nearest Police facility.

As a result of this fraud all our accounts were frozen and we may have been delayed in paying your bill or account. We regret this inconvenience. In consideration of our long standing relationship with your firm we would also appreciate if you could not penalize us for this delay in payment of your bill and write off any charges accruing from this unavoidable delay.

If you have any questions please feel free to contact me.

Sincerely,



Husain Nagamia MD FRCS.

June 21st 2006