

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030481

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: ADVANCED ENTS OF TAMPA BAY, LLC

## Current Principal Place of Business:

625 6TH AVENUE S., SUITE 385  
ST. PETERSBURG, FL 33701

## New Principal Place of Business:

## Current Mailing Address:

625 6TH AVENUE S., SUITE 385  
ST. PETERSBURG, FL 33701

## New Mailing Address:

625 6TH AVENUE S., SUITE 385  
ST. PETERSBURG, FL 33701

FEI Number: 26-2838481

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FELIX, MARK R MANAGER  
625 6TH AVENUE S., SUITE 385  
SUITE 385  
ST. PETERSBURG, FL 33701 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: P ( ) Delete  
Name: ESPINOLA, TRINA E MD  
Address: 625 6TH AVENUE S., SUITE 385  
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: VP ( ) Delete  
Name: ESPINOLA, TRINA E MD  
Address: 625 6TH AVENUE S., SUITE 385  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: T ( ) Delete  
Name: ESPINOLA, TRINA E MD  
Address: 625 6TH AVENUE S., SUITE 385  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: S ( ) Delete  
Name: ESPINOLA, TRINA E MD  
Address: 625 6TH AVENUE S., SUITE 385  
City-St-Zip: ST. PETERSBURG, FL 33701

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TRINA E. ESPINOLA, MD

P

03/12/2009

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