

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031117

FILED
Apr 14, 2005
Secretary of State

Entity Name: TRI-STATE HEALTHCARE OF WEST CARROLTON, LLC

Current Principal Place of Business:

1680 MICHIGAN AVE
736
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1680 MICHIGAN AVE
736
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 01-0795224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 32301 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: WAYNE RAFANELLI

04/14/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SHISGUL, BARRY
Address: 1111 KANE CONCOURSE, SUITE 301
City-St-Zip: BAY HARBOR, FL 33154

Title: ST (X) Delete
Name: SHISGUL, BARRY
Address: 1111 KANE CONCOURSE, SUITE 301
City-St-Zip: BAY HARBOR, FL 33154

ADDITIONS/CHANGES:

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 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: BARRY SHISGUL

MGR

04/14/2005

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