

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036655

FILED  
Apr 30, 2004  
Secretary of State

**Entity Name:** RAM SURGI-CENTER INVESTMENTS, LLC

**Current Principal Place of Business:**

1405 S.E. GOLDTREE DRIVE STE. C  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

1405 S.E. GOLDTREE DRIVE STE. C  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 20-0961819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KLEIN, STUART B  
1551 FORUM PLACE STE. 400B  
WEST PALM BEACH, FL 33401 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: RAM, LAUREN  
Address: 1405 S.E. GOLDTREE DRIVE STE. C  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGRM ( ) Delete  
Name: RAM, LEONARD J  
Address: 1405 S.E. GOLDTREE DRIVE STE. C  
City-St-Zip: PORT ST. LUCIE, FL 34952

**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: LAUREN RAM

MRS

04/30/2004

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