2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L03000039360

Entity Name: MRA CLINICAL RESEARCH, LLC

Current Principal Place of Business:

7500 SW 87TH AVE., STE. 200
MIAMI, FL 33173

New Principal Place of Business:

6141 SUNSET DRIVE
STE. 301
MIAMI, FL 33143

Current Mailing Address:

7500 SW 87TH AVE., STE. 200
MIAMI, FL 33173

New Mailing Address:

6141 SUNSET DRIVE
STE. 301
MIAMI, FL 33143

FEI Number: 26-0113461 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, HOWARD I M.D.
7500 SW 87TH AVE., STE. 200
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

SCHWARTZ, HOWARD I M.D.
6141 SUNSET DRIVE
STE. 301
MIAMI, FL 33143 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: 04/24/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: SCHWARTZ, HOWARD I
Address: 7500 SW 87TH AVE., STE. 200
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition
Name: SCHWARTZ, HOWARD I
Address: 6141 SUNSET DRIVE STE. 301
City-St-Zip: MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the 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: HOWARD SCHWARTZ P 04/24/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date