

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040003

FILED
May 06, 2005
Secretary of State

Entity Name: BROWARD MEDICAL GROUP, LLC

Current Principal Place of Business:

11130 NW 58 PLACE
HIALEAH, FL 33012 US

New Principal Place of Business:

3521 W BROWARD BLVD
104
FT LAUDERDALE, FL 33312 US

Current Mailing Address:

11130 NW 58 PLACE
HIALEAH, FL 33012 US

New Mailing Address:

3521 W BROWARD BLVD
104
FT LAUDERDALE, FL 33312 US

FEI Number: 20-0312730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FERNANDEZ, RAFAEL J
4143 SW 74 COURT
SUITE C
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

GONZALEZ, HUMBERTO
11300 NW 87 CT
150
HIALEAH, FL 33018 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: HUMBERTO GONZALEZ

05/06/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: PEREZ, ALDO
Address: 8641 NW 191 STREET
City-St-Zip: MIAMI GARDENS, FL 33015 US

ADDITIONS/CHANGES:

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: ALDO PEREZ

MGRM

05/06/2005

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