

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043657

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** ORLANDO A. CUADRA M.D., LLC

**Current Principal Place of Business:**

8784 SOUTH KENDALE CIRCLE  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

8784 SOUTH KENDALE CIRCLE  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number:** 01-0801798

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THE COMPANY CORPORATION  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** MGRM  
**Name:** CUADRA, ORLANDO A M.D.  
**Address:** 8784 SOUTH KENDALE CIRCLE  
**City-St-Zip:** LAKE WORTH, FL 33467 US

I hereby 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:** ORLANDO A. CUADRA M.D.

MGRM

04/28/2011

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