

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043895

FILED
May 01, 2004
Secretary of State

Entity Name: RAM HEALTHCARE CONSULTANTS, LLC

Current Principal Place of Business:

6731 SW 33RD TERR.
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

C/O ATER REGISTERED AGENTS, LLC
2601 S. BAYSHORE DR., STE. 600
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ATER REGISTERED AGENTS, LLC
2601 S. BAYSHORE DR., STE. #600
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

ATER REGISTERED AGENTS, LLC
2601 SOUTH BAYSHORE DRIVE
SUITE 600
COCONUT GROVE, FL 33133 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: SANTIAGO ELJAEK III, MANAGER

05/01/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: VILLANUEVA, MIKE
Address: 6731 SW 33RD TERR.
City-St-Zip: MIAMI, FL 33155

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: MICHAEL VILLANUEVA

MGR

05/01/2004

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