

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043895

FILED
Apr 29, 2005
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 SOUTH BAYSHORE DRIVE
SUITE 600
COCONUT GROVE, FL 33133 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: 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: MIKE VILLANUEVA

MGR

04/29/2005

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