

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000725

FILED
Sep 12, 2007
Secretary of State

Entity Name: PHYSICAL THERAPY AND ASSOCIATES, LLC

Current Principal Place of Business:

4930 PALM AVE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4930 PALM AVE
HIALEAH, FL 33012

New Mailing Address:

P O BOX 402566
MIAMI BEACH, FL 33140

FEI Number: 58-2680449 **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:

ARAZOZA & FERNANDEZ-FRAGA, P.A.
2100 SALZEDO ST, STE 300
CORAL GABLES, FL 33134 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: MGR () Delete
Name: GARCIA, CARLOS
Address: 4692 NW 183RD ST
City-St-Zip: MIAMI, FL 33055

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 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: CARLOS GARCIA

MGR

09/12/2007

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