

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007037

FILED
Mar 19, 2009
Secretary of State

Entity Name: SUNCOAST RESEARCH GROUP, LLC

Current Principal Place of Business:

330 SW 27TH AVENUE
506
MIAMI, FL 33135 US

New Principal Place of Business:

330 SW 27TH AVENUE
SUITE 506
MIAMI, FL 33135 US

Current Mailing Address:

330 SW 27TH AVENUE
506
MIAMI, FL 33135 US

New Mailing Address:

330 SW 27TH AVENUE
SUITE 506
MIAMI, FL 33135 US

FEI Number: 47-0937190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, MARCO A
7744 NW 112 PLACE
DORAL, FL 33178 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 () Delete
Name: KUTNER, MARK E MD
Address: 330 SW 27TH AVENUE SUITE 506
City-St-Zip: MIAMI, FL 33135 US

Title: MGRM () Delete
Name: RAMIREZ, MARCO A
Address: 330 SW 27TH AVENUE SUITE 506
City-St-Zip: MIAMI, FL 33135 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: GAMON, RAQUEL M
Address: 330 SW 27TH AVENUE SUITE 506
City-St-Zip: MIAMI, FL 33135 US

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: MARCO A RAMIREZ

MGRM

03/19/2009

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