

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000009155

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** UROLOGY SPECIALTY GROUP, LLC

**Current Principal Place of Business:**

2103 CORAL WAY  
SUITE 600  
MIAMI, FL 33145 US

**New Principal Place of Business:**

2931 CORAL WAY  
MIAMI, FL 33145 US

**Current Mailing Address:**

2103 CORAL WAY  
SUITE 600  
MIAMI, FL 33145 US

**New Mailing Address:**

2931 CORAL WAY  
MIAMI, FL 33145 US

**FEI Number:** 20-0658451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, JOSE E  
2103 CORAL WAY, STE. 305  
MIAMI, FL 33145 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: PRES  
Name: ESPOSITO, JOSEPH MD  
Address: 2931 CORAL WAY  
City-St-Zip: MIAMI, FL 33145

Title: VP  
Name: HAN, HOKE  
Address: 6030 HOLLYWOOD BLVD  
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: VP  
Name: WEITZENFELD, MARK  
Address: 21110 BISCAYNE BLVD STE 401  
City-St-Zip: AVENTURA, FL 33180 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: JOSEPH ESPOSITO

MGRM

03/23/2012

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