

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000022754

FILED
Apr 21, 2011
Secretary of State

Entity Name: BAY AREA INFECTIOUS DISEASE AND INFUSION CENTER, PLC

Current Principal Place of Business:

5840 PARK BLVD
PINELLAS PARK, FL 33781 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60357
ST. PETERSBURG, FL 33784 US

New Mailing Address:

FEI Number: 34-2041470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UPPAL, NEELAM T
5840 PARK BLVD.
PINELLAS PARK, FL 33781 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
Name: UPPAL, NEELAM T
Address: 5840 PARK BLVD
City-St-Zip: PINELLAS PARK, FL 33781 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: NEELAM UPPAL

DR.

04/21/2011

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