

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028524

FILED
Feb 18, 2011
Secretary of State

Entity Name: BROWARD QUALITY MEDICAL, LLC

Current Principal Place of Business:

6301 PEMBROKE ROAD
C/O PEMBROKE PHYSICIANS ASS, INC.
HOLLYWOOD, FL 33023

New Principal Place of Business:

Current Mailing Address:

6301 PEMBROKE ROAD
C/O PEMBROKE PHYSICIANS ASS, INC.
HOLLYWOOD, FL 33023

New Mailing Address:

FEI Number: 55-0862779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEMBROKE PHYSICIANS ASSOCIATED, INC.
6301 PEMBROKE ROAD
HOLLYWOOD, FL 33023 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: PEMBROKE PHYSICIANS ASSOCIATED, INC.
Address: 6301 PEMBROKE ROAD
City-St-Zip: HOLLYWOOD, FL 33023

Title: MGRM
Name: MARKELIS, MARIO
Address: 2500 E. HALLANDALE BEACH BLVD., SUITE 211
City-St-Zip: HOLLYWOOD, FL 33023

Title: MGRM
Name: RAPP, STEVEN J
Address: 2500 E. HALLANDALE BEACH BLVD., SUITE 211
City-St-Zip: HALLANDALE, FL 33009

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: PEMBROKE PHYSICIANS ASSOC. INC.

RA

02/18/2011

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