

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034633

FILED
May 01, 2006
Secretary of State

Entity Name: PALM BEACH CARDIOVASCULAR REALTY, LLC

Current Principal Place of Business:

2503 BURNS ROAD
PALM BEACH, FL 33410

New Principal Place of Business:

600 UNIVERSITY BLVD
SUITE 200
JUPITER, FL 33458

Current Mailing Address:

2503 BURNS ROAD
PALM BEACH, FL 33410

New Mailing Address:

600 UNIVERSITY BLVD
SUITE 200
JUPITER, FL 33458

FEI Number: 20-2024584 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:

Name and Address of New Registered Agent:

WHITE, JOHN II
1645 PALM BEACH LAKES BLVD., SUITE 1200
WEST PALM BEACH, FL 33401 US

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: VARGAS, AGUSTIN A MD
Address: 2503 BURNS ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VARGAS, AGUSTIN A MD
Address: 600 UNIVERSITY BLVD #200
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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: AGUSTIN A VARGAS MD

MGR

05/01/2006

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