

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044111

FILED
Mar 25, 2008
Secretary of State

Entity Name: FLORIDA ACADEMIC DERMATOLOGY CENTERS, LLC

Current Principal Place of Business:

1400 NW 12TH AVENUE
SUITE 4
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

1400 NW 12TH AVENUE
SUITE 4
MIAMI, FL 33136

New Mailing Address:

FEI Number: 20-1238143 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KAUFFMAN, RONALD H
100 SE SECOND ST, STE 2700
MIAMI, FL 33131 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: KERDEL, FRANCISCO A
Address: 1400 NW 12TH AVE, STE 4
City-St-Zip: MIAMI, FL 33136

ADDITIONS/CHANGES:

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

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: FRANCISCO KERDEL

DR

03/25/2008

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