

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046027

FILED
Feb 24, 2005
Secretary of State

Entity Name: SUNRISE CARDIOLOGY ASSOCIATES, LLC

Current Principal Place of Business:

8393 WEST OAKLAND PARK BLVD.
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

2061 NW BOCA RATON BLVD.
SUITE 201
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DI CAPUA, JOSEPH
2061 NW BOCA RATON BLVD.
SUITE 201
BOCA RATON, FL 33431 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/MEMBERS:

Title: MGR () Delete
Name: DI CAPUA, LUCIE
Address: 2061 NW BOCA RATON BLVD. SUITE 201
City-St-Zip: BOCA RATON, FL 33431

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 for the exemption stated in Section 119.07(3)(i), 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: JOSEPH J DI CAPUA MGR 02/24/2005

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