

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050600

FILED
Feb 16, 2012
Secretary of State

Entity Name: SOUTH FLORIDA PERINATAL MEDICINE, P.L.

Current Principal Place of Business:

6200 SUNSET DR
SUITE 301
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

6200 SUNSET DR
SUITE 301
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0368302 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CARRERAS, JOSE
C/O 6200 SUNSET DRIVE
SUITE 301
MIAMI, FL 33143 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: LAI, ANTHONY R MDPA
Address: 6200 SUNSET DR., SUITE 301
City-St-Zip: MIAMI, FL 33143

Title: MGRM
Name: GOMEZ, JORGE L MDPA
Address: 6200 SUNSET DR., SUITE 301
City-St-Zip: MIAMI, FL 33143

Title: MGRM
Name: JENSEN, LARS P MDPA
Address: 6200 SUNSET DR., SUITE 301
City-St-Zip: MIAMI, FL 33143

Title: MGRM
Name: MARTIN, DIBE MDPA
Address: 6200 SUNSET DR SUITE 301
City-St-Zip: MIAMI, FL 33143

Title: MGR
Name: VIDAL, ANA MDPA
Address: 6200 SUNSET DRIVE SUITE 301
City-St-Zip: MIAMI, FL 33143

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: ANTHONY LAI

MGRM

02/16/2012

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