

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068046

FILED
Apr 30, 2010
Secretary of State

Entity Name: MIAMI HAND CENTER, PL

Current Principal Place of Business:

8905 SW 87TH AVENUE, SUITE 100
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

8905 SW 87TH AVENUE, SUITE 100
MIAMI, FL 33176

New Mailing Address:

FEI Number: 20-1643415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSEN, MICHAEL A ESQ
355 ALHAMBRA CIRCLE SUITE 801
CORAL GABLES, FL 33134 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: MGR
Name: ORBAY, JORGE L MD
Address: 8905 SW 87TH AVENUE, SUITE 100
City-St-Zip: MIAMI, FL 33176

Title: P
Name: BADIA, ALEJANDRO MD
Address: 8950 SW 87TH AVENUE, SUITE 100
City-St-Zip: MIAMI, FL 33176

Title: P
Name: KHOURI, ROGER K MD
Address: 8905 SW 87TH AVENUE, SUITE 100
City-St-Zip: MIAMI, FL 33176

Title: P
Name: GONZALEZ-HERNANDEZ, EDUARDO MD
Address: 8905 SW 87TH AVENUE, SUITE 100
City-St-Zip: MIAMI, FL 33176

Title: P
Name: STEPHEN, ALEX MD
Address: 8705 SW 87TH AVE
City-St-Zip: MIAMI, FL 33176

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: JORGE L ORBAY

MRG

04/30/2010

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

LO4000068046

Cordova & Aponte

Accountants and Business Consultants



May 27th, 2010

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

7300 N. Kendall Dr.
Suite 201
Miami, FL 33156
Tel: (305) 925-0131
Fax: (305) 925-8100

Re: Miami Hand Center, PL
Document # LO4000068046
2010 LIMITED LIABILITY COMPANY ANNUAL REPORT
Date filed April 30, 2010

Dear Sir or madam:

On April 30, 2010 Cordova & Aponte completed an annual return for the Miami Hand Center, PLLC .

When completing this return an error occurred and the electronic signature was erroneous.

We were completing this return on behalf of partners, Roger K. Khouri, MD and Stephen Alex, MD.

We are not officers or stockholders of the entity and therefore the filing of this return should be null and void.

We are following Florida Statue 607.0124, which gives the guidelines for correcting a filed document.

Please confirm receipt of this letter.

If additional information is necessary to complete the correction of this error contact me directly.

Sincerely

Diego E. Cordova