2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2006
Secretary of State

DOCUMENT# L04000068272

Entity Name: MEDSTAT URGENT CARE CENTERS, P.L.

Current Principal Place of Business:

6149 WILBUR WAY
LAKE WORTH, FL 33467

New Principal Place of Business:

6522 SE KANNER HWY
STUART, FL 34997

Current Mailing Address:

6149 WILBUR WAY
LAKE WORTH, FL 33467

New Mailing Address:

6522 SE KANNER HWY
STUART, FL 34997

FEI Number: 16-1711775 **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:

KORNBERG, JOEL MPJDPA
7301-A WEST PALMETTO PARK ROAD, SUITE 305C
BOCA RATAON, FL 33433 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 ( ) Delete
Name: BUGGIA, MARY ANNE MD
Address: 7741 BELMONT DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR ( ) Delete
Name: SORRENTINO, ANTHONY DO
Address: 7741 BELMONT DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR ( ) Delete
Name: FRIEDMAN, JOEL MD
Address: 6149 WILBUR WAY
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

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

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

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 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: DAVID FRIEDMAN DIR 07/06/2006

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