2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008892

Entity Name: DR. DAVID L. SHAPIRO, LLC

FILED Feb 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3595 SHERIDAN ST. 3860 SHERIDAN ST.

SUITE 105 SUITE A

HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 US

Current Mailing Address: New Mailing Address:

3595 SHERIDAN ST. 3860 SHERIDAN ST.

SUITE 105 SUITE A

HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 US

FEI Number: 20-2254032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHAPIRO, DAVID L
3860 SGERUDAB STREET, SUITE A
HOLLYWOOD, FL 33021 US
SHAPIRO, DAVID L
3860 SHERIDAN STREET
SUITE A

OLLYWOOD, FL 33021 US SUITE A HOLLYWOOD, FL 33021 US

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: 02/07/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:SHAPIRO, DAVID LName:SHAPIRO, DAVID LAddress:3595 SHERIDAN ST., SUITE 105Address:3860 SHERIDAN ST., SUITE A

 Address:
 3595 SHERIDAN ST., SUITE 105
 Address:
 3860 SHERIDAN ST., SUI'

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:
 HOLLYWOOD, FL 33021

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: DR DAVID L SHAPIRO MGR 02/07/2006