2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 22, 2007
Secretary of State

DOCUMENT# L05000017260

Entity Name: R.J. OLIVA PHYSICAL THERAPY LLC

Current Principal Place of Business:

1085 NW 126 CT
MIAMI, FL 33182

New Principal Place of Business:

Current Mailing Address:

1085 NW 126 CT
MIAMI, FL 33182

New Mailing Address:

FEI Number: 72-1598845 **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:

OLIVA, RAFAEL J
1085 NW 126 CT
MIAMI, FL 33182 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: PRES ( ) Delete
Name: OLIVA, RAFAEL J
Address: 1085 NW 126 CT
City-St-Zip: MIAMI, FL 33182

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM ( ) Change (X) Addition
Name: BISIO, MARINA SEC
Address: 1085 NW 126 CT
City-St-Zip: MIAMI, FL 33182

Title: MGRM ( ) Change (X) Addition
Name: DEVARONA, VIRGINIA SEC
Address: 1085 NW 126 CT
City-St-Zip: MIAMI, FL 33182

I hereby certify that the information supplied with this filing does not qualify 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: RAFAEL JESUS OLIVA MGR 05/22/2007

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