

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000029770

Entity Name: JAVIER E. OLIVER, M.D., PLLC

FILED  
Apr 13, 2006  
Secretary of State

**Current Principal Place of Business:**

6317 NE 113TH PL  
MIAMI, FL 33178

**New Principal Place of Business:**

6317 NW 113TH PL  
MIAMI, FL 33178

**Current Mailing Address:**

6317 NE 113TH PL  
MIAMI, FL 33178

**New Mailing Address:**

6317 NW 113TH PL  
MIAMI, FL 33178

FEI Number: 20-2560939

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OLIVER, JAVIER E  
6317 NE 113TH PL  
MIAMI, FL 33178 US

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

OLIVER, JAVIER E  
6317 NW 113TH PL  
MIAMI, FL 33178 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/13/2006

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: OLIVER, JAVIER E  
Address: 6317 NE 113TH PL  
City-St-Zip: MIAMI, FL 33178

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: OLIVER, JAVIER E  
Address: 6317 NW 113TH PL  
City-St-Zip: MIAMI, FL 33178

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: JAVIER E. OLIVER

MGR

04/13/2006

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