

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030349

FILED
Feb 28, 2012
Secretary of State

Entity Name: THE VENETIAN SPINE INSTITUTE, LLC

Current Principal Place of Business:

721 SE 17TH ST, STE 104
104
FT LAUDERDALE, FL 33316

New Principal Place of Business:

2641 NE 47TH ST.
LIGHTHOUSE POINT, FL 33064

Current Mailing Address:

16950 NORTH BAY ROAD
2201
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

2641 NE 47TH ST.
LIGHTHOUSE POINT, FL 33064

FEI Number: 20-8016579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAYEDAHMAD, WALEED W MGRM
16950 NORTH BAY ROAD
2201
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

PERFORMANCE REHAB, INC.
2641 NE 47TH ST.
LIGHTHOUSE POINT, FL 33064 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: BRIAN MEVORAH

02/28/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR
Name: PERFORMANCE REHAB, INC.
Address: 2641 NE 47TH ST
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGMR
Name: ATLANTIC ANESTHESIA & SPINE INSTITUTE PA
Address: 16950 NORTH BAY RD. #2201
City-St-Zip: MIAMI, FL 33160

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: PERFORMANCE REHAB, INC.

MGMR

02/28/2012

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