

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030966

FILED
Mar 21, 2008
Secretary of State

Entity Name: PHYSICIANS FIRST ALLIANCE, LLC

Current Principal Place of Business:

7891 W FLAGLER STREET
#354
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

7891 W FLAGLER STREET
#354
MIAMI, FL 33144

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICARDO, GOMEZ
7891 W FLAGLER STREET
#354
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

ARELLANO, CLAUDIO F
7891 W FLAGLER STREET
#354
MIAMI, FL 33144 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: CLAUDIO F ARELLANO

03/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GOMEZ, RICARDO
Address: 7891 W FLAGLER STREET, #354
City-St-Zip: MIAMI, FL 33144

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ARELLANO, CLAUDIO F
Address: 7891 W FLAGLER STREET, #354
City-St-Zip: MIAMI, FL 33144

Title: MGR () Change (X) Addition
Name: GOMEZ, RICARDO
Address: 7891 W FLAGLER STREET, #354
City-St-Zip: MIAMI, FL 33144

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: CLAUDIO F ARELLANO

MGR

03/21/2008

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