

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031773

FILED
Jun 07, 2008
Secretary of State

Entity Name: PREMIER CLINICAL SITES LLC

Current Principal Place of Business:

5405 PENTAIL CIRCLE
TAMPA, FL 33625 US

New Principal Place of Business:

Current Mailing Address:

5405 PENTAIL CIRCLE
TAMPA, FL 33625 US

New Mailing Address:

FEI Number: 59-3807964 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:

Name and Address of New Registered Agent:

GARCIA, NESTOR
5405 PENTAIL CIRCLE
TAMPA, FL 33625 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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GUEDES, RICARDO
Address: 5405 PENTAIL CIRCLE
City-St-Zip: TAMPA, FL 33625 US

Title: MGRM () Delete
Name: GARCIA, NESTOR
Address: 5405 PENTAIL CIRCLE
City-St-Zip: TAMPA, FL 33625 US

ADDITIONS/CHANGES:

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

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

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: RICARDO GUEDES

CEO

06/07/2008

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