

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032191

FILED
Apr 11, 2007
Secretary of State

Entity Name: SHEFA MEDICAL ASSOCIATES, P.L.L.C.

Current Principal Place of Business:

1565 SAXON BLVD
202
DELTONA, FL 32725 US

New Principal Place of Business:

Current Mailing Address:

POB 471486
LAKE MONROE, FL 32747 US

New Mailing Address:

FEI Number: 20-2595755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHMED, SHAKIL
1113 CATHCART CIRCLE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

AHMED, SHAKIL
5687 BASSETT PLACE
SANFORD, FL 32771 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:

04/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AHMED, SHAKIL
Address: 1113 CATHCART CIRCLE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: AZMAT, HINA
Address: 1113 CATHCART CIRCLE
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AHMED, SHAKIL
Address: 5687 BASSETT PLACE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM (X) Change () Addition
Name: AZMAT, HINA
Address: 5687 BASSETT PLACE
City-St-Zip: SANFORD, FL 32771 US

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: HINA AZMAT

MGRM

04/11/2007

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