

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000034490

**Entity Name:** MANDARIN HEALTH GROUP, LLC

**FILED**  
**Apr 05, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

9301 NORTHEAST 6TH AVE., SUITE 313  
MIAMI SHORES, FL 33138

**New Principal Place of Business:**

9301 NORTHEAST 6TH AVE.  
SUITE C 313  
MIAMI SHORES, FL 33138

**Current Mailing Address:**

9301 NORTHEAST 6TH AVE., SUITE 313  
MIAMI SHORES, FL 33138

**New Mailing Address:**

**FEI Number:** 20-2694673      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEWIS, PETER A  
307 WEST PARK AVENUE, SUITE 200  
TALLAHASSEE, FL 32302      US

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

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: SENA, DION  
Address: 9301 NORTHEAST 6TH AVE., SUITE 313  
City-St-Zip: MIAMI SHORES, FL 33138

**ADDITIONS/CHANGES:**

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

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: DION R. SENA

MGMR

04/05/2006

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