

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000052043

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** PREMIER PEDIATRICS MANAGEMENT, LLC

**Current Principal Place of Business:**

19084 N.E. 29TH AVENUE  
101  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

5722 S FLAMINGO RD STE 168  
FORT LAUDERDALE, FL 33330

**New Mailing Address:**

19084 N.E. 29TH AVENUE  
101  
AVENTURA, FL 33180

**FEI Number:** 20-3072421

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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  
Name: KRANTZ, WARREN M M.D.  
Address: 19084 N.E. 29TH AVENUE  
City-St-Zip: AVENTURA, FL 33180

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: WARREN KRANTZ MD

PRES

04/27/2011

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