

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000066670

Entity Name: RAMON LEON MD, LLC

**FILED**  
**Feb 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7540 S.W. 61ST AVE.  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

10035 S.W. 8TH TERRACE  
MIAMI, FL 33174

**New Mailing Address:**

FEI Number: 02-0743147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEON, RAMON  
7540 S.W. 61ST AVE.  
MIAMI, FL 33143 US

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

LEON, RAMON MD  
7540 S.W. 61ST AVE.  
MIAMI, FL 33143 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: RAMON LEON MD

02/03/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEON, RAMON MD  
Address: 10035 S.W. 8TH TERRACE  
City-St-Zip: MIAMI, FL 33174

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: RAMON LEON

MGRM

02/03/2010

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