

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074557

FILED  
Jun 15, 2009  
Secretary of State

Entity Name: MIAMI GASTROENTEROLOGY ASSOCIATES, LLC

**Current Principal Place of Business:**

9085 SW 87TH AVENUE, SUITE 205  
MIAMI, FL 33176

**New Principal Place of Business:**

8200 S.W. 117 AVENUE  
110  
MIAMI, FL 33183

**Current Mailing Address:**

9085 SW 87TH AVENUE, SUITE 205  
MIAMI, FL 33176

**New Mailing Address:**

8200 S.W. 117 AVENUE  
110  
MIAMI, FL 33183

FEI Number: 20-3237996      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:**

GARCIA, NELSON JR  
9085 SW 87TH AVENUE, SUITE 205  
MIAMI, FL 33176 US

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

GARCIA, NELSON JR  
8200 S.W. 117 AVENUE  
110  
MIAMI, FL 33183 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: \_\_\_\_\_

06/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GARCIA, NELSON JR  
Address: 9365 SW 98 AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: MGRM ( ) Delete  
Name: MORALES, PEDRO  
Address: 10785 SW 135 TERRACE  
City-St-Zip: MIAMI, FL 33176

**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: NELSON GARCIA

MGRM

06/15/2009

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