## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074711

Entity Name: GASTRO PHYSICIANS ENTERPRISES, LLC

FILED Feb 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Finicipal Flace of Business.	New Fillicipal Flace of Busiliess

260 LOOKOUT PLACE SUITE # 201 MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

1101 N MAITLAND AVE SUITE # 2 MAITLAND, FL 32751

FEI Number: 55-0906062 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HILAL, NADIA A 1101 N MAITLAND AVE SUITE #2 MAITLAND, FL 32751 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:

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

(X) Change ( ) Addition

NATH ENTERPRISE LLC.

160 N SPRING LAKE DRIVE

ALTAMONTE SPRINGS, FL 32714

## MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NATH ENTERPRISES LLC,
Address: 160 N SPRING LAKE DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WLT ENTERPRISES, LLC,
 Name:

 Address:
 1790 SUMMERLAND AVE
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 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: TALAL E HILAL MGR 02/16/2007