

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092945

Entity Name: DORAL SALUD LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

2262 NW 94 AVE
MIAMI, FL 33172

New Principal Place of Business:

10910 NW 67TH TERRACE
DORAL, FL 33178

Current Mailing Address:

2262 NW 94 AVE
MIAMI, FL 33172

New Mailing Address:

10910 NW 67TH TERRACE
DORAL, FL 33178

FEI Number: 20-4532312 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:

MAITA, OSCAR A
2262 NW 94 AVE
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

MAITA, OSCAR A
10910 NW 67TH TERRACE
DORAL, FL 33178 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: OM

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAITA, OSCAR A
Address: 2262 NW 94 AVE
City-St-Zip: MIAMI, FL 33139 US

Title: MGR (X) Delete
Name: PATINO, COLOMBIA A
Address: 2262 NW 94 AVE
City-St-Zip: MIAMI, FL 33172 US

Title: MGR (X) Delete
Name: PALACIO, VERONICA
Address: 2262 NW 94 AVE
City-St-Zip: MIAMI, FL 33172 US

Title: MGR (X) Delete
Name: SALCEDO, PEDRO
Address: 2262 NW 94 AVE
City-St-Zip: MIAMI, FL 33172 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAITA, OSCAR A
Address: 10910 NW 67TH TERRACE
City-St-Zip: DORAL, FL 33178 US

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

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: OM

MGR

05/01/2007

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