2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2008
Secretary of State

DOCUMENT# L05000095040

Entity Name: UNITED PATHOLOGY LAB, LLC

Current Principal Place of Business:

612 PALMETTO STREET
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

612 PALMETTO STREET
NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address:

612 PALMETTO STREET
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

612 PALMETTO STREET
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 59-3436026 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NAGRANI, MARK
612 PALMETTO STREET
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

MARK, MARK
612 PALMETTO STREET
NEW SMYRNA BEACH, FL 32168 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: MARK NAGRANI 01/06/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: THE NICOLE NAGRANI I, RREVOCABLE TRU S T
Address: 612 PALMETTO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM (X) Delete
Name: THE MARK K NAGRANI I, RREVOCABLE TRU S T
Address: 612 PALMETTO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES:

Title: DR (X) Change ( ) Addition
Name: NAGRANI, MARK
Address: 612 PALMETTO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

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: MARK NAGRANI DR 01/06/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date