2007 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED Feb 28, 2007 8:00 am Secretary of State				
	ENT # L050000995			02-28-2007	90151 011	****5	0.00	
1. Entity Name NU-CONCEP	PTS BEHAVIORAL HEAL	TH CENTER, LLC						
Principal Place of B 12912 S.W. 133 C MIAMI, FL 33186	COURT, SUITE A	Mailing Address 12912 S.W. 133 COURT, MIAMI, FL 33186	SUITE A		600199	30		
2. Principal Place of 8250 8	of Business - No P.O. Box #	3. Mailing Address 8250 SW 40	) ST .					
Suite, Apt. #, etc	c.	Suite, Apt. #, etc.		02222007	Chg-LLC	CR2E083 (1	12/06)	
City & State		City & State MIAMI, R ·		4. FEI Numb 20-359				plied For t Applicable
<sup>zip</sup> 33155	Country	Zip 33155	Country USA		of Status Desired		00 Addi Required	
6.	Name and Address of Current R				Address of New R			
SERRA, CHRIS			Street Addre		SEPPA	<u> </u>		
12912 S.W. 13 MIAMI, FL 331	33 COURT, SUITE A 186			_	STREET	,		
			City	NEC		<b>F</b>	7in Code	}
3. The above name	ed entity submits this statement for	the purpose of changing its re			the in the State of Bo	ئا Lan famili	B B ar with a	155 and accent
the obligations o			<b>.</b>			1	1	
SIGNATURE	1-Sluad	nd title if applicable. (NOTE: R	Registered Agent signature reg	juired when reinstating)		<u>a   85  </u> DATÉ	07	
SIGNATURE	1 Sluad	nd title if applicable. (NOTE: R	legistered Agent signature rec	jured when reinstating)		DATÉ DATÉ Department of		
Filing	Lure, hydd or prnied name o'registered agent ar Fee is \$50.00 by May 1, 2007 MANAGING MEMBER	RS/MANAGERS	10.	juired when reinstating)		Department of	of State	
Filing Due b	Lure, hydd or prnied name o'registered agent ar I Fee is \$50.00 by May 1, 2007 MANAGING MEMBER GRM RRA, CHRISTINE		10. Title Name	juired when reinstating)	Florida	Department of		Addition
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Filing Due b TILE MG AME SEF TREET ADORESS 294 MIA TIY-ST-ZIP MIA	I Fee is \$50.00 by May 1, 2007 MANAGING MEMBER GRM RRA, CHRISTINE 45 S.W. 145 AVENUE AMI, FL 33175 GRM	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	juired when reinstating)	Florida		of State	
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