## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000101947

Entity Name: BAL HARBOUR MEDICAL, LLC

FILED Feb 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1001 BRICKELL BAY DRIVE SUITE 3104 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1001 BRICKELL BAY DRIVE SUITE 3104 MIAMI, FL 33131

FEI Number: 20-3639046 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:

RODRIGUEZ, HUMBERTO L ESQ. 999 PONCE DE LEON BLVD. PENTHOUSE 1135 CORAL GABLES, FL 33134 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

## MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: DE CASTRO, ALVARO Name: DE CASTRO, ALVARO

Name: DE CASTRO, ALVARO Name: DE CASTRO, ALVARO
Address: 1001 BRICKELL BAY DRIVE, SUITE 3104 Address: 1001 BRICKELL BAY DRIVE, SUITE 3104

City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: MARTIN-GUEDEZ, RAFAEL
Address: 1001 BRICKELL BAY DRIVE. SUITE 3104

Name: MARTIN-GUEDEZ, RAFAEL
Address: 1001 BRICKELL BAY DRIVE. SUITE 3104

Address: 1001 BRICKELL BAY DRIVE. SUITE 3104

Address. 1001 BRICKELL BAT DRIVE, SOITE 3104 Address. 1001 BRICKELL BAT DRIVE, SOITE 3104

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33131

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition

Name: BELTRAN, NAEMAR

Address: 1001 BRICKELL BAY DRIVE, SUITE 3104

City-St-Zip: City-St-Zip: MIAMI, FL 33131

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition

Name: DE GREGORIO, ROXANNA

Address: Address: 1001 BRICKELL BAY DRIVE, SUITE 3104

City-St-Zip: City-St-Zip: MIAMI, FL 33131

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: RAFAEL MARTIN MGRM 02/28/2007