

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000121397

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA ONCOLOGY AND HEMATOLOGY CONSULTANTS, LLC

**Current Principal Place of Business:**

4850 W. OAKLAND PARK BLVD., SUITE C  
LAUDERDALE LAKES, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

4850 W. OAKLAND PARK BLVD., SUITE C  
LAUDERDALE LAKES, FL 33313

**New Mailing Address:**

**FEI Number:** 65-0577436

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ABRAMS, STEVEN M M.D.  
7351 WEST OAKLAND PARK BLVD., SUITE 101  
LAUDERHILL, FL 33319 US

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

SCHNEIDER, ANDREW M M.D.  
7351 WEST OAKLAND PARK BLVD., SUITE 101  
LAUDERHILL, FL 33319 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: ANDREW M. SCHNEIDER, MD

03/15/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MELO, JOSE M.D.  
Address: 260 S.W. 84TH AVE., SUITE C  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM  
Name: DENNIS, DAVID K M.D.  
Address: 260 S.W. 84TH AVE., SUITE C  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM  
Name: SCHNEIDER, ANDREW M M.D.  
Address: 7351 W. OAKLAND PARK BLVD., SUITE 101  
City-St-Zip: LAUDERHILL, FL 33319

Title: MGRM  
Name: TACHE', JASON E D.O.  
Address: 260 SW 84TH AVE., STE. C  
City-St-Zip: PLANTATION, FL 33324

I hereby 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: ANDREW M. SCHNEIDER, M.D.

MGRM

03/15/2011

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