

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000009628

FILED
Jan 20, 2008
Secretary of State

Entity Name: MIAMI CENTER FOR CARDIOVASCULAR DISEASE, PLLC

Current Principal Place of Business:

1643 BRICKELL AVENUE, SUITE #1601
MIAMI, FL 33129

New Principal Place of Business:

1400 NW 12TH AVE
SUITE 1
MIAMI, FL 33136

Current Mailing Address:

1643 BRICKELL AVENUE, SUITE #1601
MIAMI, FL 33129

New Mailing Address:

1400 NW 12TH AVE
SUITE 1
MIAMI, FL 33136

FEI Number: 20-4306501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, JAVIER
1643 BRICKELL AVENUE, SUITE #1601
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: JIMENEZ, JAVIER
Address: 1643 BRICKELL AVENUE, SUITE #1601
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES:

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: JAVIER JIMENEZ, MD

OWNE

01/20/2008

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