## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014135

City-St-Zip: MIAMI, FL 33143 US

Entity Name: MIAMI MEDICAL PROPERTIES LLC

FILED Feb 27, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
6141 SUN SUITE 501 MIAMI, FL					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
6141 SUN SUITE 501 MIAMI, FL					
FEI Number:	: 20-5381248	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
The above in the State	SET DR     33143 US   named entity s  e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both	
SIGNATURE: Electronic Signature of Registered Agent			ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () SHELDON, ERIO 6141 SUNSET I MIAMI, FL 3314	OR SUITE 501	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () PACHON, JAIMI 6141 SUNSET [ MIAMI, FL 3314	OR SUITE 501	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () PACHON, ELAIN		Title: Name:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ERIC SHELDON MGRM 02/27/2009