2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2007
Secretary of State

DOCUMENT# L06000017051

Entity Name: DERMATOLOGY RESEARCH INSTITUTE, LLC

Current Principal Place of Business:

C/O ROSENTHAL ROSENTHAL RASCO, LLC
2875 NE 191ST STREET, SUITE 500
AVENTURA, FL 33180 US

New Principal Place of Business:

4425 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33146 US

Current Mailing Address:

C/O ROSENTHAL ROSENTHAL RASCO, LLC
2875 NE 191ST STREET, SUITE 500
AVENTURA, FL 33180 US

New Mailing Address:

4425 PONCE DE LEON BLVD
SUITE 002
CORAL GABLES, FL 33146 US

FEI Number: 51-0567613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSENTHAL, KERRY E
2875 NE 191ST STREET,
SUITE 500
AVENTURA, FL 33180 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: BRANDT, FREDRIC S
Address: 4425 PONCE DE LEON BLVD, SUITE 200
City-St-Zip: CORAL GABLES, FL 33146 US

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: FREDRIC S BRANDT MGR 02/26/2007

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