

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023237

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: MIAMI LAKES ORTHODONTIC PRACTICE MANAGEMENT, LLC

## Current Principal Place of Business:

12515 NORTH KENDALL DRIVE, SUITE 406  
MIAMI, FL 33186

## New Principal Place of Business:

13195 SW 134TH STREET  
SECOND FLOOR  
MIAMI, FL 33186

## Current Mailing Address:

12515 NORTH KENDALL DRIVE, SUITE 406  
MIAMI, FL 33186

## New Mailing Address:

13195 SW 134TH STREET  
SECOND FLOOR  
MIAMI, FL 33186

FEI Number: 20-4447582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOBER, MELVYN S.D.D.S.  
12515 NORTH KENDALL DRIVE, SUITE 406  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

GOBER, MELVYN S.D.D.S.  
13195 SW 134TH STREET  
SECOND FLOOR  
MIAMI, FL 33186 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:

04/29/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGMR ( ) Delete  
Name: MAIN STREET CHILDREN, 'S DENT AND OR T HO LLC  
Address: 12515 NO. KENDALL DRIVE STE 406  
City-St-Zip: MIAMI, FL 33186

Title: M ( ) Delete  
Name: OPG EQUITY LLC,  
Address: 12515 NO KENDALL DRIVE STE 406  
City-St-Zip: MIAMI, FL 33186

Title: M ( ) Delete  
Name: WEISS, JEFFREY A DDS  
Address: 15600 NW 67 AVENUE # 110  
City-St-Zip: MIAMI LAKES, FL 33014

## ADDITIONS/CHANGES:

Title: MGMR (X) Change ( ) Addition  
Name: MAIN STREET CHILDREN, 'S DENT AND OR T HO LLC  
Address: 13195 SW 134TH STREET 2ND FLOOR  
City-St-Zip: MIAMI, FL 33186

Title: M (X) Change ( ) Addition  
Name: OPG EQUITY LLC,  
Address: 13195 SW 134TH STREET 2ND FLOOR  
City-St-Zip: MIAMI, FL 33186

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: MELVYN S GOBER

MGMR

04/29/2008

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