2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024721

Entity Name: ROBERT RADEN, M.D., LLC

FILED Jan 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5130 LINTON BOULEVARD 5130 LINTON BOULEVARD

DELRAY BEACH, FL 33484 D4

DELRAY BEACH, FL 33484 US

Current Mailing Address: New Mailing Address:

5130 LINTON BOULEVARD 5130 LINTON BOULEVARD DELRAY BEACH, FL 33484

DELRAY BEACH, FL 33484 US

RADEN, ROBERT

5130 LINTON BOULEVARD

FEI Number: 20-4604356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MILLER, ROBERT B C/O TABAS, FREEDMAN, SOLOFF & MILLER, P.A.

25 SOUTHÉAST 2ND AVÉNUE, SUITE 919

MIAMI, FL 33131 US DELRAY BEACH, FL 33484 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: ROBERT RADEN 01/19/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition

ROBERT RADEN, M.D., ROBERT RADEN, M.D., Name: Name: Address: 3202 FALLSTAFF ROAD Address: 5130 LINTON BLVD D4 City-St-Zip: BALTIMORE, MD 21215 City-St-Zip: DELRAY BEACH, FL 33484 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: ROBERT RADEN **MGRM** 01/19/2007