2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2010
Secretary of State

DOCUMENT# L06000035102

Entity Name: WESTON MEDICAL CENTRE LLC

Current Principal Place of Business:

1855 N. CORPORATE LAKES BLVD.
SUITE# 1
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

2700 WALKERS WAY
WESTON, FL 33331 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JAFFER, MOHSIN H MR.
2700 WALKERS WAY
WESTON, FL 33331 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: MGRM
Name: JAFFER, MOHSIN M MR.
Address: 2700 WALKERS WAY
City-St-Zip: WESTON, FL 33331 US

I hereby 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 Statues.

SIGNATURE: MOHSIN JAFFER MR 04/20/2010

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