2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

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Entity Name: DORAL SURGICAL SERVICES LLC

Current Principal Place of Business:

1100 NW 95TH STREET
NORTH SHORE MEDICAL CENTER
MIAMI, FL 33150 US

New Principal Place of Business:

Current Mailing Address:

6440 NW 114TH AVE, UNIT 405
DORAL, FL 33178 US

New Mailing Address:

FEI Number: 26-2813872 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TIRADOR, MAXIMO R
6440 NW 114TH AVE, UNIT 405
DORAL, FL 33178 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: TIRADOR, MAXIMO R
Address: 6440 NW 114TH AVE UNIT 405
City-St-Zip: DORAL, FL 33178 US

Title: MGR
Name: SZAJNERT, CARLOS
Address: 6440 NW 114TH AVE UNIT 405
City-St-Zip: DORAL, FL 33178 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: MAXIMO R TIRADOR MGRM 01/04/2012

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