

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044331

FILED
Apr 28, 2008
Secretary of State

Entity Name: MEDICAL CONCIERGE CONCEPTS, LLC

Current Principal Place of Business:

600 HERITAGE DRIVE, SUITE 100
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

7108 FAIRWAY DRIVE
STE 205
PALM BEACH GARDENS, FL 33418

New Mailing Address:

600 HERITAGE DRIVE, SUITE 100
JUPITER, FL 33458

FEI Number: 20-4802888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANILES, ALYS N
701 US HWY. ONE
STE 402
NORTH PALM BEACH, FL 33408 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 () Delete
Name: BIOKINETEX, LLC,
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: PCEO () Delete
Name: SPECTOR, AARON H
Address: 600 HERITAGE DR, STE 110
City-St-Zip: JUPITER, FL 33458

Title: VPS () Delete
Name: REED, MICHAEL L
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VPT () Delete
Name: LOPPERT, DAVID A
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP (X) Delete
Name: AMBROSE, FRANKLIN W
Address: 7108 FAIRWAY DRIVE, STE 205
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BIOKINETEX, LLC,
Address: 600 HERITAGE DRIVE, STE 110
City-St-Zip: JUPITER, FL 33458

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPS (X) Change () Addition
Name: REED, MICHAEL L
Address: 600 HERITAGE DR, STE 110
City-St-Zip: JUPITER, FL 33458

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL L. REED

VPS

04/28/2008

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