

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000048678

Entity Name: JABHIM, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

5248 RED CEDAR DRIVE, #102
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

5248 RED CEDAR DRIVE, #102
FORT MYERS, FL 33907

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITESMAN, GUY E
1715 MONROE STREET
FORT MYERS, FL 33901 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: MGR () Delete
Name: JACOBS, ALLEN T M.D.
Address: 5248 RED CEDAR DRIVE, #102
City-St-Zip: FORT MYERS, FL 33907

Title: MGR () Delete
Name: HEMED, IRIT M.D.
Address: 5248 RED CEDAR DRIVE, #102
City-St-Zip: FORT MYERS, FL 33907

Title: MGR () Delete
Name: MARTIN, BRIAN G D.O.
Address: 5248 RED CEDAR DRIVE, #102
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES:

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

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: ALLEN JACOBS

MD

03/20/2009

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