

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000059971

Entity Name: KEJARO, M.D., PLLC

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1441 NE 16 TERRACE  
FT. LAUDERDALE, FL 33304

**New Principal Place of Business:**

5333 N. DIXIE HIGHWAY  
201  
FT. LAUDERDALE, FL 33334

**Current Mailing Address:**

1441 NE 16 TERRACE  
FT. LAUDERDALE, FL 33304

**New Mailing Address:**

1100 N. RIO VISTA BLVD  
FT. LAUDERDALE, FL 33301

FEI Number: 20-5074843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBINSON, KEITH  
1441 NE 16 TERRACE  
FT. LAUDERDALE, FL 33304 US

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

ROBINSON, KEITH  
1100 N. RIO VISTA BLVD  
FT. LAUDERDALE, FL 33301 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: KEITH ROBINSON, MD

03/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ROBINSON, KEITH  
Address: 1100 N. RIO VISTA BLVD  
City-St-Zip: FT. LAUDERDALE, FL 33301

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 Statutes.

SIGNATURE: KEITH ROBINSON, MD

MGR

03/29/2010

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