

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000060927

FILED
Dec 11, 2009
Secretary of State

Entity Name: VIERA INTERNAL MEDICINE, PLC

Current Principal Place of Business:

8075 SPYGLASS HILL ROAD #101
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

8075 SPYGLASS HILL ROAD #101
MELBOURNE, FL 32940

New Mailing Address:

110 LONGWOOD AVENUE
ROCKLEDGE, FL 32955

FEI Number: 56-2592679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORESCU, LUCIAN L
8075 SPYGLASS HILL RD #101
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

WUESTHOFF FAMILY PHYSICIANS INC
110 LONGWOOD AVENUE
ROCKLEDGE, FL 32955 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: EMIL P MILLER

12/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FLORESCU, LUCIAN L
Address: 8075 SPYGLASS HILL ROAD #101
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WUESTHOFF FAMILY PHYSICIANS
Address: 110 LONGWOOD AVENUE
City-St-Zip: ROCKLEDGE, FL 32955

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: EMIL P MILLER

MGRM

12/11/2009

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