2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2010
Secretary of State

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Entity Name: SIRVEN AND ASSOCIATES ALLERGY AND ASTHMA CENTER, PROFESSIONAL LIMITED COMPANY

Current Principal Place of Business:

747 PONCE DE LEON BLVD., SUITE 411
CORAL GABLES, FL 33134

New Principal Place of Business:

8200 SW 117 AVENUE
SUITE 302
MIAMI, FL 33183

Current Mailing Address:

747 PONCE DE LEON BLVD., SUITE 411
CORAL GABLES, FL 33134

New Mailing Address:

8200 SW 117 AVENUE
SUITE 302
MIAMI, FL 33183

FEI Number: 20-5193135 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIRVEN, VIVIANA MD
747 PONCE DE LEON BLVD., SUITE 411
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SIRVEN, VIVIANA MD
8200 SW 117 AVENUE
SUITE 302
MIAMI, FL 33183 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: VIVIANA SIRVEN 01/07/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SIRVEN, VIVIANA
Address: 8200 SW 117 AVENUE, SUITE 302
City-St-Zip: MIAMI, FL 33183

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: VIVIANA SIRVEN MGR 01/07/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date