

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074247

Entity Name: M B MEDICAL GROUP, L.L.C.

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

6705 RED ROAD  
SUITE 510  
CORAL GABLES, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

6705 RED ROAD  
SUITE 510  
CORAL GABLES, FL 33143 US

**New Mailing Address:**

FEI Number: 20-5345651      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PAMELA, MERINO  
6705 RED ROAD  
SUITE 510  
CORAL GABLES, FL 33143 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  
Name: PAMELA MERINO, M.D.  
Address: 6705 RED ROAD SUITE 510  
City-St-Zip: CORAL GABLES, FL 33143 US

Title: MGR  
Name: ANGEL BETANCOURT, M.D.  
Address: 6705 RED ROAD SUITE 510  
City-St-Zip: CORAL GABLES, FL 33143 US

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: PAMELA MERINO      MD      01/06/2011

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