

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080685

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: HEALTHCARE INVESTMENT LLC

**Current Principal Place of Business:**

1061 OAKLAND PARK BLVD  
SUITE 128  
OAKLAND PARK, FL 33311

**New Principal Place of Business:**

21248 HARBOR WAY  
244  
AVENTURA, FL 33180

**Current Mailing Address:**

21248 HARBOR WAY  
244  
AVENTURA,, FL 33180

**New Mailing Address:**

FEI Number: 11-3788905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LANFIR, JAVIER  
21248 HARBOR WAY  
244  
AVENTURA, FL 33180 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 ( ) Delete  
Name: LANFIR, JAVIER  
Address: 21248 HARBOR WAY #244  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES:**

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: JAVIER LANFIR

MANA

04/02/2009

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