

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085716

Entity Name: MA, MD, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

8805 SW 44TH LANE
GAINESVILLE, FL 32608 US

New Principal Place of Business:

8805 SW 44TH LANE
GAINESVILLE, FL 32608 US

Current Mailing Address:

8805 SW 44TH LANE
GAINESVILLE, FL 32608 US

New Mailing Address:

19260 FISHERMANS BEND DRIVE
LUTZ, FL 33558 US

FEI Number: 77-0664827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MA, LI MD
8805 SW 44TH LANE
GAINESVILLE, FL 32608 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: MA, LI MD
Address: 3100 SIMPSON AVE
City-St-Zip: OCEAN CITY, NJ 08226 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MA, LI MD
Address: 8805 SW 44TH LANE
City-St-Zip: GAINESVILLE, FL 32608 US

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: LI MA

DR.

04/30/2007

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