

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092516

FILED
Apr 08, 2008
Secretary of State

Entity Name: BEST MEDICAL RESOURCES "LLC"

Current Principal Place of Business:

6421 CONGRESS AVE
SUITE 114
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6421 CONGRESS AVE
SUITE 114
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-5602546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAMLER, GARY L
6421 CONGRESS AVE
SUITE 114
BOCA RATON, FL 33487 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: KAMLER, GARY L SECY
Address: 2363 DEER CREEK TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGRM (X) Delete
Name: REBOTTTINI-GALARDO, TANYA R PRES.
Address: 8752 WELLINGTON VIEW DR.
City-St-Zip: WELLINGTON, FL 33411

Title: MGRM (X) Delete
Name: REBOTTINI, PHILLIP M
Address: 9365 VIA GRANDE WEST
City-St-Zip: WELLINGTON, FL 33411

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KAMLER, GARY L PRES
Address: 2363 DEER CREEK TRAIL
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GARY L KAMLER

PRES

04/08/2008

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