

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099577

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** MID-FLORIDA GASTROENTEROLOGY CONSULTANTS, LLC

**Current Principal Place of Business:**

10000 WEST COLONIAL DR.  
SUITE 389  
OCOEE, FL 34761 US

**New Principal Place of Business:**

**Current Mailing Address:**

10000 WEST COLONIAL DR.  
SUITE 389  
OCOEE, FL 34761 US

**New Mailing Address:**

FEI Number: 20-5689196

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MASTALI, MOHAMMAD R  
10000 WEST COLONIAL DR.  
SUITE 389  
OCOEE, FL 34761 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: MASTALI, MOHAMMAD R  
Address: 10000 WEST COLONIAL DR. SUITE 389  
City-St-Zip: OCOEE, FL 34761 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: MOHAMMAD REZA MASTALI, M.D

DR.

04/10/2012

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