

# 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000117034

Entity Name: HEALX ONCOLOGY, LLC

FILED  
Sep 12, 2007  
Secretary of State

**Current Principal Place of Business:**

10193 SHIREOAKS LANE  
BOCA RATON, FL 33498

**New Principal Place of Business:**

**Current Mailing Address:**

10193 SHIREOAKS LANE  
BOCA RATON, FL 33498

**New Mailing Address:**

FEI Number: 02-0796189

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AGARWAL, ANURAG  
10193 SHIREOAKS LANE  
BOCA RATON, FL 33498 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: ROMESBURG, PAUL  
Address: 4380 NW 135TH STREET  
City-St-Zip: OPA LOCKA, FL 33054

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: AGRAWAL, AKHIL  
Address: 4380 NW 135TH STREET  
City-St-Zip: OPA LOCKA, FL 33054

Title: MGRM ( ) Change (X) Addition  
Name: AGRAWAL, SUKRIT  
Address: 4380 NW 135TH STREET  
City-St-Zip: OPA LOCKA, FL 33054

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: AKHIL AGRAWAL

MGRM

09/12/2007

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