

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118699

FILED
May 16, 2007
Secretary of State

Entity Name: PATIENT CARE SERVICES LLC

Current Principal Place of Business:

2325 SW 19 STREET
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2325 SW 19 STREET
MIAMI, FL 33145

New Mailing Address:

FEI Number: 20-8038569 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DOMENECH, LIZA M
2325 SW 19 STREET
MIAMI, FL FL US

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: MGR () Delete
Name: DOMENECH, LIZA M
Address: 2325 SW 19 STREET
City-St-Zip: MIAMI, FL 33145

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: LIZA M DOMENECH

MGR

05/16/2007

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