

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013456

FILED
Mar 19, 2009
Secretary of State

Entity Name: MEHRAVISTA HEALTH, LLC

Current Principal Place of Business:

32196 U.S. HIWHAY 19 NORTH
STE B
PALM HARBOR, FL 34684

New Principal Place of Business:

32196 U.S. HIGHWAY 19 N.
STE B
PALM HARBOR, FL 34684

Current Mailing Address:

32196 U.S. HIWHAY 19 NORTH
STE B
PALM HARBOR, FL 34684

New Mailing Address:

32196 U.S. HIGHWAY 19 N.
STE B
PALM HARBOR, FL 34684

FEI Number: 20-8666127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEHRA, RAHUL N
2918 W. HARBOR VIEW AVE.
TAMPA, FL 33611 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: MGR () Delete
Name: MEHRA, RAHUL
Address: 32196 U.S. HIWHAY 19 NORTH
City-St-Zip: PALM HARBOR, FL 34684

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: RAHUL N. MEHRA

MGR

03/19/2009

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