

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000014073

FILED  
Mar 15, 2011  
Secretary of State

**Entity Name:** SIMO AND BRUCK PEDIATRICS, PLLC

**Current Principal Place of Business:**

10111 W. FOREST HILL BLVD.  
SUITE 150  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

10115 W. FOREST HILL BLVD.  
SUITE 402  
WELLINGTON, FL 33414 US

**Current Mailing Address:**

10111 W. FOREST HILL BLVD.  
SUITE 150  
WELLINGTON, FL 33414 US

**New Mailing Address:**

10115 W. FOREST HILL BLVD.  
SUITE 402  
WELLINGTON, FL 33414 US

FEI Number: 20-8568122

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MIGUEL SIMO,MD  
10111 W.FOREST HILL BLVD.  
SUITE 150  
WELLINGTON, FL 33414 US

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

MIGUEL SIMO,MD  
10115 W.FOREST HILL BLVD.  
SUITE 402  
WELLINGTON, FL 33414 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:

03/15/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MIGUEL SIMO, M.D.  
Address: 10115 W. FOREST HILL BLVD., SUITE 402  
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM  
Name: BRUCK, MICHAEL  
Address: 10115 W. FOREST HILL BLVD., SUITE 402  
City-St-Zip: WELLINGTON, FL 33414 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: MIGUEL SIMO,MD

CEO

03/15/2011

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