

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015712

FILED
Jan 27, 2008
Secretary of State

Entity Name: NICK A. MAHAVIR, DPM, PL

Current Principal Place of Business:

10000 WEST COLONIAL DRIVE, SUITE 496
OCOE, FL 34761

New Principal Place of Business:

1140 KELTON AVE
BLDG 3
OCOE, FL 34761

Current Mailing Address:

931 NORTH STATE ROAD 434, SUITE 1201-342
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAHAVIR, NICK A
10000 WEST COLONIAL DRIVE, SUITE 496
OCOE, FL 34761 US

Name and Address of New Registered Agent:

MAHAVIR, NICK A
1140 KELTON AVE
BLDG 3
OCOE, FL 34761 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:

01/27/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MAHAVIR, NICK A
Address: 10000 WEST COLONIAL DRIVE, SUITE 496
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAHAVIR, NICK A
Address: 1140 KELTON AVE, BLDG #3
City-St-Zip: OCOE, FL 34761

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: NICK A. MAHAVIR

DR.

01/27/2008

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