

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000032588

FILED  
May 19, 2008  
Secretary of State

Entity Name: NEUROMUSCULAR TREATMENT CENTER LLC

**Current Principal Place of Business:**

1811 BAYSHORE GARDENS PARKWAY  
BRADENTON, FL 34207

**New Principal Place of Business:**

**Current Mailing Address:**

1811 BAYSHORE GARDENS PARKWAY  
BRADENTON, FL 34207

**New Mailing Address:**

FEI Number: 22-3957305      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

GEETHA . PALLEGAR  
1811 BAYSHORE GARDENS PARKWAY  
BRADENTON, FL 34207 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: GEETHA . PALLEGAR

05/19/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PALLEGAR, SOMASHEKAR  
Address: 1811 BAYSHORE GARDENS PARKWAY  
City-St-Zip: BRADENTON, FL 34207

Title: MGR ( ) Delete  
Name: PALLEGAR, AJAY  
Address: 1811 BAYSHORE GARDENS PARKWAY  
City-St-Zip: BRADENTON, FL 34207

Title: ST ( ) Delete  
Name: PALLEGAR, GEETHA  
Address: 1811 BAYSHORE GARDENS PARKWAY  
City-St-Zip: BRADENTON, FL 34207

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GEETHA.PALLEGAR

MRS

05/19/2008

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