2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# L07000033900

Entity Name: INTEGRATED DERMATOLOGY OF WEST BROWARD, LLC

Current Principal Place of Business:

3444 N UNIVERSITY DR
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

902 CLINT MOORE RD, STE 226
BOCA RATON, FL 33487

New Mailing Address:

902 CLINT MOORE RD
SUITE 226
BOCA RATON, FL 33487

FEI Number: 68-0647586 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PBC DERM LLC
951 BROKEN SOUND PARKWAY
#115
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

PBC DERM LLC
902 CLINT MOORE RD
226
BOCA RATON, FL 33487 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: JEFFREY QUEEN 04/25/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PBC DERM LLC
Address: 951 BROKEN SOUND PARKWAY #115
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PBC DERM LLC
Address: 902 CLINT MOORE RD # 226
City-St-Zip: BOCA RATON, FL 33487

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: JEFFREY QUEEN MGR 04/25/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date