

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048768

Entity Name: VIP MEDICAL HOTEL, LLC

FILED
May 02, 2008
Secretary of State

Current Principal Place of Business:

11811 NORTH DALE MABRY HWY
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

11811 NORTH DALE MABRY HWY
TAMPA, FL 33618

New Mailing Address:

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

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: DR () Change (X) Addition
Name: ROSEN, JAY L MD
Address: 11811 NORTH DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618

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: JAY L ROSEN MD

DR

05/02/2008

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