

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063350

Entity Name: INSCORE, L.L.C.

FILED
Apr 06, 2009
Secretary of State

Current Principal Place of Business:

6920 NERVIA STREET
CORAL GABLES, FL 33143

New Principal Place of Business:

299 ALHAMBRA CIRCLE
C/O PRIME CARE
CORAL GABLES, FL 33134

Current Mailing Address:

6920 NERVIA STREET
CORAL GABLES, FL 33143

New Mailing Address:

299 ALHAMBRA CIRCLE
C/O PRIME CARE
CORAL GABLES, FL 33134

FEI Number: 23-0395016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, ROBERT M
4000 HOLLYWOOD BLVD STE 485-SOUTH
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: HALEGUA, INO
Address: 6920 NERVIA STREET
City-St-Zip: CORAL GABLES, FL 33143

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HALEGUA, INO
Address: 299 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

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: INO HALEGUA

MGR

04/06/2009

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