2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# L07000090522

Entity Name: A & M INTERNATIONAL HEALTH PLANS, L.L.C.

Current Principal Place of Business:

7300 NORTH KENDALL DRIVE, STE. 505
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

7300 NORTH KENDALL DRIVE, STE. 505
MIAMI, FL 33156

New Mailing Address:

FEI Number: 11-3824429 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

J.M. ANTONELL ENTERPRISES, INC.
9261 SW 101 STREET
MIAMI, FL 33156 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 (X) Delete
Name: MCKELVEY, WILLIAM G
Address: 7300 NORTH KENDALL DRIVE, STE. 505
City-St-Zip: MIAMI, FL 33156

Title: MGR ( ) Delete
Name: ANTONELL, JOSEPH M
Address: 9261 SW 101 STREET
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

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: JOSEPH M. ANTONELL MR. 04/28/2008

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