

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000095610

Entity Name: PALM MEDICAL NETWORK, LLC

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7925 NW 12TH STREET  
SUITE 321  
MIAMI, FL 33126 US

**New Principal Place of Business:**

7240 SW 58TH ST  
MIAMI, FL 33143 US

**Current Mailing Address:**

7925 NW 12TH STREET  
SUITE 321  
MIAMI, FL 33126 US

**New Mailing Address:**

7240 SW 58TH ST  
MIAMI, FL 33143 US

FEI Number: 06-1829158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LUZ S. MORIYON  
16749 NW 13 COURT  
PEMBROKE PINES, FL 33028 US

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

LOAR, LACY  
7240 SW 58TH ST  
MIAMI, FL 33143 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: LACY LOAR

04/24/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HYGEA HEALTH HOLDING, INC.  
Address: 7240 SW 58TH ST  
City-St-Zip: MIAMI, FL 33143 US

I hereby 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: MANUEL IGLESIAS

MGRM

04/24/2010

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