2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104948

FILED Jun 25, 2009 Secretary of State

Entity Name: DRS. ARONSON, TRAINA & IBARS, CONSULTANTS IN NEUROLOGICAL SURGERY, LLC

New Principal Place of Business: Current Principal Place of Business: 6200 SUNSET DR STE 403 MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 6200 SUNSET DR STE 403 MIAMI, FL 33143 FEI Number: 26-1179038 FEI Number Applied For () 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: CORPORATION COMPANY OF MIAMI 250 AUSTRALIAN AVE, SUITE 500 (JAF) WEST PALM BEACH, FL 33401 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete IBARS, GEORGE C MD Name: Name: Address: 6200 SUNSET DR STE 403 Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: MGR () Delete Title: () Change () Addition TRAINA, JOSEPH A MD Name: Name: Address: 6200 SUNSET DR STE 403 Address: MIAMI, FL 33143 City-St-Zip: 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: GEORGE C. IBARS, MD MGR 06/25/2009