

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Feb 03, 2009  
Secretary of State**

DOCUMENT# L08000013317

Entity Name: JOSE A. SANDOVAL, PH.D., L.L.C.

**Current Principal Place of Business:**

11401 SW 40TH STREET  
323  
MIAMI, FL 33165 US

**New Principal Place of Business:**

**Current Mailing Address:**

11401 SW 40TH STREET  
323  
MIAMI, FL 33165 US

**New Mailing Address:**

FEI Number: 41-2268015      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SANDOVAL, JOSE A  
11401 SW 40TH STREET  
323  
MIAMI, FL 33165 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: MGRM ( ) Delete  
Name: SANDOVAL, JOSE A  
Address: 11401 SW 40 STREET, SUITE 323  
City-St-Zip: MIAMI, FL 33165 US

Title: MGRM (X) Delete  
Name: SANDOVAL, JOSE A  
Address: 1550 MADRUGA AVENUE, SUITE 414  
City-St-Zip: CORAL GABLES, FL 33146

**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: JOSE A. SANDOVAL

MGRM

02/03/2009

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