

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018205

FILED
Jan 19, 2010
Secretary of State

Entity Name: MILLER HEALTHCARE NETWORK, LLC

Current Principal Place of Business:

99 NW 183 STREET
116
MIAMI, FL 33169

New Principal Place of Business:

99 NW 183 STREET
235
MIAMI, FL 33169

Current Mailing Address:

99 NW 183 STREET
116
MIAMI, FL 33169

New Mailing Address:

99 NW 183 STREET
235
MIAMI, FL 33169

FEI Number: 26-2003477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, MARTINE J
99 NW 183 STREET
116
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

MILLER, MARTINE J
99 NW 183 STREET
235
MIAMI, FL 33169 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: MARTINE JULES MILLER

01/19/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: JULES, MARTINE J
Address: 99 NW 183 STREET - 116
City-St-Zip: MIAMI, FL 33169

Title: MGRM
Name: MILLER, TIMOTHY L
Address: 99 NW 183 STREET - 116
City-St-Zip: MIAMI, FL 33169

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: MARTINE JULES MILLER

MGR

01/19/2010

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