## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000020266

City-St-Zip:

Entity Name: IRFAN R. IMAMI, M.D., P.L.

FILED Apr 15, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3419 POSEIDON WAY 1140 BROADBAND DRIVE INDIALANTIC, FL 32903 MELBOURNE, FL 32901 **Current Mailing Address: New Mailing Address:** 3419 POSEIDON WAY P.O. BOX 819 INDIALANTIC, FL 32903 MELBOURNE, FL 32902 FEI Number: 80-0155542 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAPLAN, HAROLD E ESQ. 1515 UNIVERSITY DRIVE, SUITE 203 CORAL SPRINGS, FL 33071 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: () Delete Title: ( ) Change (X) Addition IMAMI, IRFAN R Name: Name: Address: Address: P.O., BOX 819

City-St-Zip:

MELBOURNE, FL 32902

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: IRFAN IMAMI DR. 04/15/2009