

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000027901

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: QC MEDICAL INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

299 ALHAMBRA CIRCLE, STE 401  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

299 ALHAMBRA CIRCLE, STE 401  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

QUINTANA, J. JOSE  
299 ALHAMBRA CIRCLE, STE 401  
CORAL GABLES, FL 33134 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: D ( ) Change (X) Addition  
Name: QUINTANA, JUAN A MD  
Address: 4625 PONCE DE LEON BLVD  
City-St-Zip: CORAL GABLES, FL 33146

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 J. QUINTANA

A

02/19/2009

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