

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028625

FILED
Apr 27, 2009
Secretary of State

Entity Name: CENTERS OF EXCELLENCE IN SLEEP, LLC

Current Principal Place of Business:

8080 WEST FLAGLER STREET
3-E
MIAMI, FL 33144 US

New Principal Place of Business:

330 SW 27TH AVENUE
506
MIAMI, FL 33135 US

Current Mailing Address:

8080 WEST FLAGLER STREET
3-E
MIAMI, FL 33144 US

New Mailing Address:

330 SW 27TH AVENUE
506
MIAMI, FL 33135 US

FEI Number: 26-2240394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, MARCO A
7744 N. W. 112 PLACE
DORAL, FL 33178 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: RAMIREZ, MARCO A
Address: 7744 N.W 112 PLACE
City-St-Zip: DORAL, FL 33178 US

Title: MGRM () Delete
Name: KUTNER, MARK E M.D.
Address: 230 SOLANO PRADO
City-St-Zip: CORAL GABLES, FL 33156 US

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: MARCO A RAMIREZ

MGRM

04/27/2009

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