

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045874

FILED
Sep 17, 2010
Secretary of State

Entity Name: MD'S CLINICAL RESEARCH CONSORTIUM, LLC

Current Principal Place of Business:

4469 S. CONGRESS AVE., STE. 106
LAKE WORTH, FL 33461 US

New Principal Place of Business:

4469 SOUTH CONGRESS AVENUE
SUITE 106
LAKE WORTH, FL 33461 US

Current Mailing Address:

4469 S. CONGRESS AVE., STE. 106
LAKE WORTH, FL 33461 US

New Mailing Address:

4469 SOUTH CONGRESS AVENUE
SUITE 106
LAKE WORTH, FL 33461 US

FEI Number: 27-1103248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAQUERO, ANGELA
4469 S. CONGRESS AVE., STE. 106
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

BAQUERO, ANGELA
4469 SOUTH CONGRESS AVENUE
SUITE 106
LAKE WORTH, FL 33461 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: _____

09/17/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BAQUERO, ANGELA
Address: 4469 SOUTH CONGRESS AVENUE, SUITE 106
City-St-Zip: LAKE WORTH, FL 33461 US

Title: MGR
Name: GALEANO, MARIO
Address: 4469 SOUTH CONGRESS AVENUE, SUITE 106
City-St-Zip: LAKE WORTH, FL 33461 US

Title: MGR
Name: ACUNA, RICARDO
Address: 4469 SOUTH CONGRESS AVENUE, SUITE 106
City-St-Zip: LAKE WORTH, FL 33461 US

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: ANGELA BAQUERO

MGRM

09/17/2010

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