

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063240

FILED
Jan 29, 2009
Secretary of State

Entity Name: MOUNT SINAI MEDICAL CENTER UROLOGY, LLC

Current Principal Place of Business:

4300 ALTON ROAD
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

4300 ALTON ROAD - ADMINISTRATION
MIAMI BEACH, FL 33140 US

Current Mailing Address:

4300 ALTON ROAD
MIAMI BEACH, FL 33140 US

New Mailing Address:

4300 ALTON ROAD - ADMINISTRATION
MIAMI BEACH, FL 33140 US

FEI Number: 26-2893302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

FRIEDLAND, PRISCILLA
4300 ALTON ROAD - ADMINISTRATION
MIAMI BEACH, FL 33140 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: PRISCILLA FRIEDLAND

01/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOUNT SINAI MEDICAL, CENTER OF FLOR I DA, INC
Address: 4300 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES:

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: STEVEN D SONENREICH

MGMR

01/29/2009

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