2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2010
Secretary of State

DOCUMENT# L08000103682

Entity Name: A. O. RIFAI, MD, LLC

Current Principal Place of Business:

121 COTTONWOOD CIRCLE
LYNN HAVEN, FL 32444 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1750
LYNN HAVEN, FL 32444 US

New Mailing Address:

FEI Number: 26-3742991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIFAI, AHMAD O
121 COTTONWOOD CIRCLE
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

RIFAI, AHMAD O MD
121 COTTONWOOD CIRCLE
LYNN HAVEN, FL 32444 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: AHMAD O. RIFAI, MD 01/09/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RIFAI, AHMAD O MD
Address: P. O. BOX 1750
City-St-Zip: LYNN HAVEN, FL 32444 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 Statues.

SIGNATURE: AHMAD O. RIFAI, MD MGMR 01/09/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date