

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000006944

Entity Name: PALM BEACH OB-GYN, LLC

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4671 S. CONGRESS AVE.  
SUITE 100-B  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

3225 AVIATION AVE. SUITE 700  
MIAMI, FL 33133

**New Mailing Address:**

FEI Number: 54-2129332

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YELEN, MITCH  
3225 AVIATION AVE. SUITE 500  
MIAMI, FL 33133 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  
Name: VITALMD GROUP HOLDING, LLC  
Address: 3225 AVIATION AVE. SUITE 700  
City-St-Zip: MIAMI, FL 33133

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: FRANCISCO J LEON

COO

04/19/2012

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