

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000013414

Entity Name: PROVIDA HEALTHCARE, LLC

FILED
Feb 09, 2010
Secretary of State

Current Principal Place of Business:

69 APPALOOSA LANE
ORMOND BEACH, FL 32174

New Principal Place of Business:

775 WEST INDIANTOWN ROAD
STE. 4
JUPITER, FL 33458

Current Mailing Address:

PO BOX 730956
ORMOND BEACH, FL 32173

New Mailing Address:

FEI Number: 26-4279140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, ROBERT
220 S. RIDGEWOOD AVENUE
SUITE 200
DAYTONA BEACH, FL 32114 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: MGR
Name: CANTILLO, JULIAN G
Address: PO BOX 730956
City-St-Zip: ORMOND BEACH, FL 32173

Title: MGR
Name: CANTILLO, ILEANA
Address: PO BOX 730956
City-St-Zip: ORMOND BEACH, FL 32173

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: ILEANA CANTILLO

MGR

02/09/2010

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