

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000020060

FILED
May 01, 2012
Secretary of State

Entity Name: MERCH MEDICAL CENTER, LLC

Current Principal Place of Business:

6714 W FLAGLER STREET
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

6714 W FLAGLER STREET
MIAMI, FL 33144

New Mailing Address:

FEI Number: 26-4365604

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, MICHEL
6714 W FLAGLER STREET
MIAMI, FL 33144 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: ESCOBAR, MARITZA
Address: 6714 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: MGR
Name: MORENO, ROSA M
Address: 6714 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: MGR
Name: ALVAREZ, JOSE J
Address: 6714 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: MGRM
Name: CHIRINO, RENE
Address: 6714 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: MGR
Name: CRUZ, MICHEL
Address: 6714 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: MGR
Name: BETANCOURT, REINALDO
Address: 6714 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

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: RENE CHIRINO

MGRM

05/01/2012

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