

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000027514

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

**Entity Name:** SDR CLINICAL RESEARCH, LLC

**Current Principal Place of Business:**

2750 WEST 68TH STREET  
STE. 222  
HIALEAH, FL 33016 US

**New Principal Place of Business:**

2128 W. FLAGLER STREET  
SUITE 200  
MIAMI, FL 33135 US

**Current Mailing Address:**

2128 WEST FLAGLER STREET  
SECOND FLOOR  
MIAMI, FL 33135 US

**New Mailing Address:**

2128 W. FLAGLER STREET  
SUITE 200  
MIAMI, FL 33135 US

**FEI Number:** 26-4495574

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMIREZ, MARCO A  
1800 S. OCEAN DRIVE  
2305  
HALLANDALE BEACH, FL 33009 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:** RAMIREZ, MARCO A  
**Address:** 1800 S. OCEAN DRIVE APT. 2305  
**City-St-Zip:** HALLANDALE BEACH, FL 33009 US

**Title:** MGRM  
**Name:** KUTNER, MARK E MD  
**Address:** 230 SOLANO PRADO  
**City-St-Zip:** CORAL GABLES, FL 33156 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 Statutes.

**SIGNATURE:** MARCO A RAMIREZ

MGRM

04/19/2012

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