2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2012
Secretary of State

DOCUMENT# L09000042160

Entity Name: CYBERKNIFE CENTER OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

3343 STATE ROAD 7
WELLINGTON, FL 33449 US

New Principal Place of Business:

Current Mailing Address:

3343 STATE ROAD 7
WELLINGTON, FL 33449 US

New Mailing Address:

FEI Number: 27-1096088 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, RAVI
3343 STATE RD 7
WELLINGTON, FL 33449 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: PATEL, RAVI
Address: 3343 STATE ROAD 7
City-St-Zip: WELLINGTON, FL 33449 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: RAVI PATEL MGMR 01/07/2012

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