

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000055125

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** MARIANNA BLYUMIN-KARASIK, M.D., PLLC

**Current Principal Place of Business:**

186 SE 12TH TERRACE  
APT 2104  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

186 SE 12TH TERRACE  
2104  
MIAMI, FL 33131

**New Mailing Address:**

186 SE 12TH TERRACE  
APT 2104  
MIAMI, FL 33131

**FEI Number:** 27-0326087

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BLYUMIN-KARASIK, MARIANNA  
186 SE 12TH TERRACE  
2104  
MIAMI, FL 33131 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: BLYUMIN-KARASIK, MARIANNA  
Address: 186 SE 12TH TERRACE APT 2104  
City-St-Zip: MIAMI, FL 33131

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: MARIANNA BLYUMIN-KARASIK

MGRM

01/06/2010

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