

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000058952

FILED
May 01, 2012
Secretary of State

Entity Name: MAAR MEDICAL PHYSICS SERVICES, LLC

Current Principal Place of Business:

4343 NW 36TH TERRACE
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

4343 NW 36TH TERRACE
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 27-0411112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARREOLA, MANUEL
4343 NW 36TH TERRACE
GAINESVILLE, FL 32605 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: ARREOLA, MANUEL
Address: 4343 NW 36TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM
Name: ROSEMARYAM, AZAR
Address: 4343 NW 36TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

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: MANUEL ARREOLA

MGRM

05/01/2012

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