

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000068513

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** AVENTURA SURGICAL GROUP, LLC

**Current Principal Place of Business:**

21110 BISCAYNE BLVD. SUTIE 400  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

21110 BISCAYNE BLVD. SUTIE 400  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:** 26-1923405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PINCHASIK, STRONGIN, MUSKAT, STEIN & COMPA  
3225 AVIATION AVENUE, SUITE 500  
MIAMI, FL 33133 US

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

PINCHASIK, YELEN, MUSKAT, STEIN LLC  
3225 AVIATION AVENUE, SUITE 500  
MIAMI, FL 33133 US

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: MITCH YELEN

03/15/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WIENER, EDWARD L DO  
Address: 21110 BISCAYNE BLVD. SUTIE 400  
City-St-Zip: AVENTURA, FL 33180

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: IDORIS RODRIGUEZ

COO

03/15/2011

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