

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070343

FILED
Apr 24, 2012
Secretary of State

Entity Name: ELBA E. MASID, M.D., L.L.C.

Current Principal Place of Business:

4513 OLD CANOE CREEK RD.
ST. CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

4513 OLD CANOE CREEK RD.
ST. CLOUD, FL 34769

New Mailing Address:

FEI Number: 27-0710840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASID, ELBA E MD
2424 BEL-AIR CIRCLE
KISSIMMEE, FL 34743 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: MGR
Name: MASID, ELBA E MD
Address: 2424 BEL-AIR CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

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: ELBA MASID

MGR

04/24/2012

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