

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000005801

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** DIVYA SINGH MD PL

**Current Principal Place of Business:**

3816 WEST VASCONIA STREET  
TAMPA, FL 33629 US

**New Principal Place of Business:**

**Current Mailing Address:**

3816 WEST VASCONIA STREET  
TAMPA, FL 33629 US

**New Mailing Address:**

**FEI Number:** 27-1774286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RELIANCE CONSULTING LLC  
3105 W WATERS AVE  
SUITE 105  
TAMPA, FL 33614 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:** SINGH, DIVYA  
**Address:** 3816 WEST VASCONIA STREET  
**City-St-Zip:** TAMPA, FL 33629 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 Statutes.

**SIGNATURE:** DIVYA SINGH

MGRM

01/14/2011

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