

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000021182

**FILED
Jan 18, 2011
Secretary of State**

Entity Name: HIALEAH MEDICAL GROUP LLC

Current Principal Place of Business:

2151 S LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2151 S LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 27-2136745 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALVAREZ, NICOLAS R
2151 S LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134 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: SOLERA HEALTH SYSTEMS LLC
Address: 2151 S. LE JEUNE ROAD, SUITE 202
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM
Name: FERNANDEZ, ROBERTO MD
Address: 135 WEST 49 STREET
City-St-Zip: HIALEAH, FL 33012

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: NICOLAS R. ALVAREZ MGRM 01/18/2011

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