

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000072850

Entity Name: PRAMOD JOSEPH MD LLC

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10216 CROSBY PLACE  
PORT ST LUCIE, FL 34986

**New Principal Place of Business:**

8036 PLANTATION LAKES DRIVE  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

10216 CROSBY PLACE  
PORT ST LUCIE, FL 34986

**New Mailing Address:**

8036 PLANTATION LAKES DRIVE  
PORT ST LUCIE, FL 34986

FEI Number: 27-2842829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOSEPH, PRAMOD  
10216 CROSBY PLACE  
PORT ST LUCIE, FL 34986 US

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

JOSEPH, PRAMOD  
8036 PLANTATION LAKES DRIVE  
PORT ST LUCIE, FL 34986 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/12/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JOSEPH, PRAMOD  
Address: 8036 PLANTATION LAKES DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34986

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: PRAMOD JOSEPH

MGR

04/12/2012

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