2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000073234

Entity Name: SOUTH FLORIDA OBSTETRICS & GYNECOLOGY, LLC

FILED Apr 10, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2387 W. 68TH STREET 15600 NW 67TH AVENUE

SUITE 303 SUITE 105 HIALEAH, FL 33016 MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

2387 W. 68TH STREET 15600 NW 67TH AVENUE SUITE 303 SUITE 105 HIALEAH, FL 33016 MIAMI LAKES, FL 33014

FEI Number: 27-3022835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GONZALEZ, ELIAS
2387 W. 68TH STREET
5UITE 303
HIALEAH, FL 33016 US
GONZALEZ, ELIAS
15600 NW 67TH AVENUE
SUITE 105
MIAMI LAKES, FL 33014 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: ELIAS GONZALEZ 04/10/2011

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: GONZALEZ, ELIAS

Address: 15600 NW 67TH AVENUE SUITE 105

City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM

Name: GONZALEZ, CHRISTY M

Address: 15600 NW 67TH AVENUE SUITE 105

City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM

Name: FOJO, ROBERTO

Address: 15600 NW 67TH AVENUE SUITE 105

City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM

Name: FOJO, STEPHANIE M

Address: 15600 NW 67TH AVENUE SUITE 105

City-St-Zip: MIAMI LAKES, FL 33014

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 Statues.

SIGNATURE: ELIAS GONZALEZ MGRM 04/10/2011