

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000075584

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** CLINICAL RESEARCH APPROACH L.L.C.

**Current Principal Place of Business:**

8620 SW 84 TERR  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

8620 SW 84 TERR  
MIAMI, FL 33143

**New Mailing Address:**

**FEI Number:** 27-3020801

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARRUBLA, JULIE A  
8620 SW 84 TERR  
MIAMI, FL 33143 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: ARRUBLA, JULIE A  
Address: 8620 SW 84 TERR  
City-St-Zip: MIAMI, FL 33143

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: JULIE A. ARRUBLA

MS.

02/16/2011

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