

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000076508

FILED
Apr 28, 2011
Secretary of State

Entity Name: METABOLIC AND CARDIOVASCULAR INSTITUTE OF FLORIDA, LLC

Current Principal Place of Business:

600 UNIVERSITY COMMONS
SUITE 200
JUPITER, FL 34952

New Principal Place of Business:

Current Mailing Address:

529 SOUTH FLAGLER DRIVE
APT 18-G
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 35-2387802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SADOW, SAMUEL H M.D.
529 SOUTH FLAGLER DRIVE
APT 18-G
WEST PALM BEACH, FL 33401 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: MGR
Name: SADOW, SAMUEL H MD
Address: 529 SOUTH FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401 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: SAMUEL H SADOW

MGR

04/28/2011

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