

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128339

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** B & B PHYSICAL THERAPY, LLC

**Current Principal Place of Business:**

12420 SW 31 ST  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

12420 SW 31 ST  
MIAMI, FL 33175

**New Mailing Address:**

**FEI Number:** 27-4377508

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LABIADA, MIGUEL A  
12420 SW 31 ST  
MIAMI, FL 33175 US

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

LABRADA, MIGUEL A  
12420 SW 31 ST  
MIAMI, FL 33175 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: MIGUEL LABRADA

03/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LABRADA, MIGUEL A  
Address: 12420 SW 31 ST  
City-St-Zip: MIAMI, FL 33175

Title: MGRM  
Name: OBAN, LUCIANA  
Address: 8879 B FONTAINEBLUE BLVD APT 203  
City-St-Zip: MIAMI, FL 33172

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: MIGUEL LABRADA

MGRM

03/21/2011

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