

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000004475

FILED
Apr 22, 2012
Secretary of State

Entity Name: ALLIANCE MEDICAL CARE GROUP, LLC

Current Principal Place of Business:

9937 PINE BOULEVARD
PEMBROKE PINES, FL 33024

New Principal Place of Business:

9869 PINES BOULEVARD
PEMBROKE PINES, FL 33024

Current Mailing Address:

9937 PINE BOULEVARD
PEMBROKE PINES, FL 33024

New Mailing Address:

9869 PINES BOULEVARD
PEMBROKE PINES, FL 33024

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEVY, ISAAC M.D.
9937 PINE BOULEVARD
PEMBROKE PINES, FL 33024 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: CASTANEDA, JOSE J M.S. PA
Address: 9869 PINES BOULEVARD
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: DIR
Name: QIAN, TIE M.D.
Address: 9869 PINES BOULEVARD
City-St-Zip: PEMBROKE PINES, FL 33024 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: JOSE J CASTANEDA,M.S.,PA

MGR

04/22/2012

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