

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000010953

FILED
Apr 30, 2012
Secretary of State

Entity Name: KROME AVENUE PHYSICAL THERAPY, LLC

Current Principal Place of Business:

999 N. KROME AVENUE
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

999 N. KROME AVENUE
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 65-0743773

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, RAYMOND
9780 E. INDIGO STREET, STE. 204
PALMETTO BAY, FL 33157 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: PALMETTO COMPREHENSIVE HEALTH CARE INC.
Address: 1313 SW 1ST STREET
City-St-Zip: MIAMI, FL 33135

Title: MGRM
Name: TOTAL THERAPY MANAGEMENT INC.
Address: 9780 E INDIGO STREET, STE. 204
City-St-Zip: PALMETTO BAY, FL 33157

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: RAYMOND LEVY

MGRM

04/30/2012

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