2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# L11000055928

Entity Name: NOSTRUM MEDICAL CENTER, HOMESTEAD, LLC

Current Principal Place of Business:

1235 N KROME AVE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

1235 N KROME AVE
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 45-2211559 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ACOSTA, NILDA R MD
1235 N KROME AVE
HOMESTEAD, FL 33030 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: ACOSTA, NILDA R MD
Address: 1235 N KROME AVE
City-St-Zip: HOMESTEAD, FL 33030 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 Statues.

SIGNATURE: NILDA R ACOSTA MD MGRM 04/26/2012

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