

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000108096

FILED
Apr 27, 2012
Secretary of State

Entity Name: PAMELA MAE MARTINEZ PHYSICIAN SERVICES, PLLC

Current Principal Place of Business:

20162 OAKFLOWER AVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

20162 OAKFLOWER AVE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 45-3354780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, PAMELA
20162 OAKFLOWER AVE
TAMPA, FL 33647 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: MARTINEZ, PAMELA M
Address: 20162 OAKFLOWER AVE
City-St-Zip: TAMPA, FL 33647

Title: TREA
Name: MARTINEZ, JOSE M
Address: 1008 EAST HILLSBOROUGH AVA
City-St-Zip: TAMPA, FL 33604

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: PAMELA MAE MARTINEZ

MGRM

04/27/2012

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