

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000136359

FILED
Jan 13, 2012
Secretary of State

Entity Name: MEDICAL CONSULTATION, LLC

Current Principal Place of Business:

C/O 199 SW 12TH AVENUE
SUITE #4
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

C/O 199 SW 12TH AVENUE
SUITE #4
MIAMI, FL 33130

New Mailing Address:

C/O 199 SW 12TH AVENUE
SUITE #4
MIAMI, FL 33130

FEI Number: 45-3968897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTAGNET, ERNESTO A
C/O 199 SW 12TH AVENUE
SUITE #4
MIAMI, FL 33130 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: MGMR
Name: RAMON, GERMAN D
Address: C/O 199 SW 12TH AVENUE, SUITE #4
City-St-Zip: MIAMI, FL 33130

Title: MGMR
Name: GARCIA, ANDREA C
Address: C/O 199 SW 12TH AVENUE, SUITE #4
City-St-Zip: MIAMI, FL 33130

Title: MGMR
Name: PERRONE, DARIO S
Address: C/O 199 SW 12TH AVENUE, SUITE #4
City-St-Zip: MIAMI, FL 33130

Title: MGRM
Name: PAZ, MARTA S
Address: C/O 199 SW 12TH AVENUE, SUITE #4
City-St-Zip: MIAMI, FL 33130

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: RAMON GERMAN D

MGRM

01/13/2012

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