

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 MAY -6 AM 11:36

**FILING FEE** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
**\$ 188.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

**DOCUMENT #** L95000000658

KIDNEY STONE CENTER OF SOUTH FLORIDA, L.C.  
1301 CAP OF TX HWY  
SUITE C-300  
AUSTIN TX 78746

1a. Principal Place of Business Address

2665 SOUTH BAYSHORE DRIVE  
MIAMI FL 33133

2. Principal Place of Business

— NA —

2a. Mailing Address

— NA —

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

08/24/1995

3a. State of Formation

FL

4. FEI Number

74-2758550

☐ Applied For

☐ Not Applicable

5. Date of Last Report

05/06/1997

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

MADORSKY, MARSHA G  
2665 S. BAYSHORE DR.  
SUITE 603  
MIAMI FL 33133

8. Name and Address of New Registered Agent/Office

Name

— NA —

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

— NA —

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM PRIME LITHOTRIPSY SERV

1301 CAPITAL OF TEXAS HIGH

AUSTIN TX

MGRM KIDNEY STONE CENTER OF

2665 SOUTH BAYSHORE DRIVE

MIAMI FL

300002517333--4  
-05/08/98--01082--021  
\*\*\*\*188.75 \*\*\*\*188.75

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

*James Clark*

JAMES CLARK

4/30/98 (512) 328-2892

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #