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

\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

FILED

Secretary of State 98 APR 21 AM 10: 45 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # of Limited Liability Company L96000000941 1a. Principal Place of Business Address FLORIDA HEART ASSOCIATES, P.L. 1390 ROYAL PALM SQUARE BOULEVARD 1390 ROYAL PALM SQUARE BOULE FORT MYERS FL 33907 FORT MYERS FL 33907 3. Date Organized or Qualified | 3a. State of Formation 2. Principal Place of Business 2a. Mailing Address 09/05/1996 4. FEI Number FLSuite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable 65-0690931 Date of Last Report 6. Certificate of Status Desired Country Zip Country \$8.75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent ROSEN, JEFFREY H M.D. Street Address (P.O. Box Number Is Not Acceptable) 1390 ROYAL PALM SQUARE BOULEVARD <u> 600002498936--- 4</u> FORT MYERS FL 33907 Suite, Apt. #, etc. -04/24/93--01010--017 ****188.75 ****188.75 City 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. (Flogistered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** 1390 ROYAL PALM SQUARE BOU MEM BUTLER, JAMES FORT MYERS FL D.O. MEM 1390 ROYAL PALM SQUARE BOU CHARLES, NELSON L M.D. FORT MYERS FL MEM HAGGMAN, DALE L D.O. 1390 ROYAL PALM SQUARE BOU FORT MYERS FL MEM ZIEGLER, EDWARD CMD 1390 ROYAL PALM SO. BLVD. FT. MYERS FL MEM TRITEL, HARVEY M.D. 1390 ROYAL PALM SQ. BLVD. FT. MYERS FL MEM HON, HENRY H M.D. 1390 ROYAL PALM SO. BLVD. FT. MYERS FL

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 Ilmited 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

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RAMPAUL SINGH
ANAGING MEMBER OR MANAGER

BLOCK 10 - ADDITIONAL INFORMATION

MANAGING

TI	ITLE	MEMBERS/MANAGERS	BUSINESS STREET ADDRESS	CITY, STATE, ZIP CODE
			DOSINEOS STREET ADDINESS	CITT, STATE, ZIF CODE
ME	ΞM	PRABAKARAN, BALA	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919
ME	EΜ	RUBIN, MICHAEL	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919
ME	EM	SENSECQUA, JAMES	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919
ME	ΞM	PRIEST, STEVEN	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919
ME	EM	KSHETRAPAL, SUBHASH	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919
ME	M	SINGH, RAMPAUL	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919
ME	M	LICCINI, PAUL	1390 ROYAL PALM SQ BLVD	FT MYERS, FL 33919