2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L96000001297

Entity Name: HEALTHTRUST SERVICES, L.L.C.

FILED Apr 17, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3225 AVIATION AVENUE, SUITE 700 CONONUT GROVE, FL 33133

Current Mailing Address: New Mailing Address:

4101 RAVENSWOOD ROAD
SUITE 120
DANIA, FL 33312 US

4101 RAVENSWOOD ROAD
SUITE 130
DANIA, FL 33312 US

AND DANIA, FL 33312 US

FEI Number: 65-0712583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARCUS, STEWART
3225 AVIATION AVENUE, SUITE 700
COCONUT GROVE, FL 33133 US
ARFOFSKY, HARVEY
4101 RAVENSWOOD ROAD
130
DANIA, FL 33312 US

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: HARVEY RAFOFSKY 04/17/2003

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

Name: RAFOFSKY, HARVEY Name:
Address: 3225 AVIATION AVENUE, SUITE 700 Address:

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Title: MGR () Delete Title: () Change () Addition
Name: MARCUS, JANE Name:
Address: 3225 AVIATION AVENUE, SUITE 700 Address:
City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip:

Title: MGP () Delete Title: () Change () Addition

Title: MGR () Delete Title: () Change () Addition Name: MARCUS, STEWART Name:

Address: 3225 AVIATION AVENUE, SUITE 700 Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: HARVEY RAFOFSKY P 04/17/2003