2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# L99000004236

Entity Name: MEDICAL DECISION, LLC

Current Principal Place of Business:

6410 N.W. 5TH WAY
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

6410 N.W. 5TH WAY
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0933440 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IZQUIERDO, JUAN
6410 N.W. 5TH WAY
FT. LAUDERDALE, FL 33309 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	( ) Delete
Name:	IZQUIERDO, HECTOR	
Address:	6410 NW 5TH WAY	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	MGRM	( ) Delete
Name:	IZQUIERDO, JUAN	
Address:	6410 NW 5TH WAY	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	MGRM	( ) Delete
Name:	IZQUIERDO, HECTOR JR	
Address:	6410 NW 5TH WAY	
City-St-Zip:	FORT LAUDERDALE, FL 33309	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JUAN IZQUIERDO CEO 04/10/2006

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