## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000000046

Entity Name: MMI ADMIN SERVICES, LLC

FILED Mar 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2500 QUANTUM LAKES DRIVE, SUITE 108 2500 QUANTUM LAKES DRIVE,

BOYNTON BEACH, FL 33426 SUITE 108

BOYNTON BEACH, FL 33426

Current Mailing Address: New Mailing Address:

2500 QUANTUM LAKES DRIVE, SUITE 108 2500 QUANTUM LAKES DRIVE,

BOYNTON BEACH, FL 33426 SUITE 108

BOYNTON BEACH, FL 33426

FEI Number: 20-0736673 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:

ROLLE, JULIA TODD, STEPHEN

2500 QUANTUM LAKES DRIVE
108

BOYNTON BEACH, FL 33426 US

2500 QUANTUM LAKES DRIVE
108

BOYNTON BEACH, FL 33426 US

The above named entity cultimits this statement for the nurness of changing its registered office or registered a

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: STEPHEN TODD 03/04/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: MOBILE MEDICAL INDUS, TRIES, INC. Name:
Address: 2500 QUANTUM LAKES DRIVE, SUITE 108 Address:

City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip:

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

Name: TODD, STEVE Name: TODD, STEPHEN

Address: 2500 QUANTUM LAKES DR., #108 Address: 2500 QUANTUM LAKES DR., #108
City-St-Zip: BOYNTN BEACH, FL 33426 US City-St-Zip: BOYNTN BEACH, FL 33426 US

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

Name:Name:CAMMARATA, DANIELAddress:Address:2500 QUANTUM LAKES DR, STE 108

Address: Address: 2500 QUANTUM LAKES DR, STE 108
City-St-Zip: City-St-Zip: BOYNTON BEACH, FL 33426

I hereby certify that the information supplied with this filing does not qualify 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: STEPHEN TODD MGR 03/04/2008