2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 14, 2007
Secretary of State

DOCUMENT# M05000003031

Entity Name: PHYSICIAN ENDORSED, LLC

Current Principal Place of Business:

409 HENDRICKS ISLE
FT. LAUDEDALE, FL 33301

New Principal Place of Business:

950 SOUTH PINE ISLAND ROAD
A-150
PLANTATION, FL 33324

Current Mailing Address:

409 HENDRICKS ISLE
FT. LAUDEDALE, FL 33301

New Mailing Address:

950 SOUTH PINE ISLAND ROAD
A-150
PLANTATION, FL 33324

FEI Number: 71-0886649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MARGULIES, MICHAEL
409 HENDRICKS ISLE
FT. LAUDEDALE, FL 33301 US

Name and Address of New Registered Agent:

MARGULIES, MICHAEL
950 SOUTH PINE ISLAND ROAD
A-150
PLANTATION, FL 33324 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: MICHEL MARGULIES 08/14/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MARGULIES, MICHAEL
Address: 409 HENDRICKS ISLE
City-St-Zip: FT. LAUDEDALE, FL 33301

Title: MGR ( ) Delete
Name: MARGULIES, ELISSA
Address: 409 HENDRICKS ISLE
City-St-Zip: FT. LAUDEDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MARGULIES, MICHAEL
Address: 950 SOUTH PINE ISLAND ROAD A-150
City-St-Zip: PLANTATION, FL 33324

Title: MGR (X) Change ( ) Addition
Name: MARGULIES, ELISSA
Address: 950 SOUTH PINE ISLAND ROAD A-150
City-St-Zip: PLANTATION, FL 33324

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: MICHAEL MARGULIES PRES 08/14/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date