

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000136

Entity Name: MIAMI SURGERY CENTER, LLC

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

2150 RIVER PLAZA DRIVE, STE 185
SACRAMENTO, CA 95833

New Principal Place of Business:

3650 NW 82ND AVENUE #101
DORAL, FL 33166

Current Mailing Address:

2150 RIVER PLAZA DRIVE, STE 185
SACRAMENTO, CA 95833

New Mailing Address:

FEI Number: 36-4600281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BADIA, ALEJANDRO MD
Address: 1278 SOUTH VENETIAN WAY
City-St-Zip: MIAMI, FL 33139

Title: MGRM () Delete
Name: HILL, DARIN J
Address: 10045 OLD WARDEN ROAD
City-St-Zip: RALEIGH, NC 27615

Title: MGRM () Delete
Name: ZAMPETTI, MARGARET
Address: 2150 RIVER PLAZA DRIVE, STE 185
City-St-Zip: SACRAMENTO, CA 95833

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: RAMBO, SEAN
Address: 2150 RIVER PLAZA DRIVE, STE 185
City-St-Zip: SACRAMENTO, CA 95833

Title: MGRM (X) Change () Addition
Name: ANGLE, TONI
Address: 2150 RIVER PLAZA DRIVE, STE 185
City-St-Zip: SACRAMENTO, CA 95833

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: TONI ANGLE

MGRM

04/22/2008

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