

2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000066670

Entity Name: RAMON LEON MD, LLC

Current Principal Place of Business:

7540 S.W. 61ST AVE.
MIAMI, FL 33143

Current Mailing Address:

10035 S.W. 8TH TERRACE
MIAMI, FL 33174

FEI Number: 02-0743147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEON, RAMON MD
7540 S.W. 61ST AVE.
MIAMI, FL 33143 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name LEON, RAMON MD
Address 10035 S.W. 8TH TERRACE
City-State-Zip: MIAMI FL 33174

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAMON LEON, MD

MGRM

05/13/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date