

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030778

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** SURGICAL SOLUTIONS, LLC

**Current Principal Place of Business:**

3426 KING GEORGE DR.  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

3426 KING GEORGE DR.  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: 22-3785434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALCOBER, DAVID  
3426 KING GEORGE DR.  
ORLANDO, FL 32835 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: MGR  
Name: ALCOBER, DAVID  
Address: 3426 KING GEORGE DR.  
City-St-Zip: ORLANDO, FL 32835 US

I hereby 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: DAVID ALCOBER

MGR

04/29/2011

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