

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054864

FILED
Mar 19, 2007
Secretary of State

Entity Name: SERVICE & MEDICAL INTERNATIONAL, LLC

Current Principal Place of Business:

16300 NE 19 AVE
SUITE 105
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

5220 S UNIVERSITY DR
STE C-102
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-1416766 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SILVA'S ENTERPRISE, INC
5220 S UNIVERSITY DR
STE C-102
DAVIE, FL 33328 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 () Delete
Name: PEREZ, ALILENI
Address: 16300 NE 19 AVE STE 105
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ALILENI PEREZ

MGR

03/19/2007

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