

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057672

Entity Name: MEDCODE, LLC

FILED  
Apr 29, 2011  
Secretary of State

**Current Principal Place of Business:**

10531 SUNSET STRIP  
SUNRISE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

10531 SUNSET STRIP  
SUNRISE, FL 33322

**New Mailing Address:**

FEI Number: 36-4558890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEID, ZALIKA  
10531 SUNSET STRIP  
SUNRISE, FL 33322 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: LEID, ZALIKA  
Address: 10531 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33322

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: ZALIKA LEID

MGR

04/29/2011

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