2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000062

Address:

City-St-Zip:

7711 N. MILITARY TRAIL

PALM BEACH GARDENS, FL 33410

Entity Name: UNI-MED CONSULTING SERVICES, LLC

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	LITARY TRL ACH GARDENS	s, FL 33410		
Current Mailing Address:			New Mailing Address:	
	LITARY TRL ACH GARDENS	s, FL 33410		
FEI Number	: 65-0818030	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:
The above	IILITARY TRAIL ACH GARDENS		purpose of changing its regist	ered office or registered agent, or both
SIGNATU				
		c Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	BROWN, JAMÉS 7711 N. MILITAF		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete BROWN, REBEKKAH B 7711 N. MILITARY TRAIL PALM BEACH GARDENS, FL 33410		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	BROWN, DAVID 7711 N. MILITAF		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGR () BROWN, ERIN	Delete I	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: JAMES W. BROWN MGRM 02/02/2009