

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021597

FILED
Jun 05, 2006
Secretary of State

Entity Name: BSN MEDICAL LATIN AMERICA LLC

Current Principal Place of Business:

5301 NORTH FEDERAL HIGHWAY
SUITE 265
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

5301 NORTH FEDERAL HIGHWAY
SUITE 265
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 06-1646305 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MURAI WALD BIONDO & MORENO
25 S.E. 2ND AVENUE
SUITE 900
MIAMI, FL 33131 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: ANZOLA, ELOY J MGR
Address: 5301 NORTH FEDERAL HIGHWAY, STE 265
City-St-Zip: BOCA RATON, FL 33487 US

Title: MGR () Delete
Name: BALL, LUIS H MGR
Address: 6185 NW24TH WAY
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGR () Delete
Name: MACHADO, CARLOS MGR
Address: 5301 NORTH FEDERAL HIGHWAY, STE 265
City-St-Zip: BOCA RATON, FL 33487 US

Title: MGR () Delete
Name: BALL, ROBERTO J MGR
Address: 6185 NW 24TH WAY
City-St-Zip: BOCA RATON, FL 33496 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: BALL, LUIS H MGR
Address: 4580 NW 23RD COURT
City-St-Zip: BOCA RATON, FL 33431 US

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

Title: MGR (X) Change () Addition
Name: BALL, ROBERTO J MGR
Address: 5301 NORTH FEDERAL HIGHWAY, STE 265
City-St-Zip: BOCA RATON, FL 33496 US

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: LUIS H BALL

MGR

06/05/2006

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