2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 18, 2009
Secretary of State

DOCUMENT# L02000021597

Entity Name: BSN MEDICAL LATIN AMERICA LLC

Current Principal Place of Business:

20283 STATE ROAD 7
SUITE 300
BOCA RATON, FL 33498

New Principal Place of Business:

Current Mailing Address:

20283 STATE ROAD 7
SUITE 300
BOCA RATON, FL 33498

New Mailing Address:

FEI Number: 06-1646305 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

TOBIN & REYES, P.A.
ATTN: DAVID S. TOBIN ESQ.
5355 TOWN CENTER ROAD, STE. 204
BOCA RATON, FL 33486 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:	BALL, ROBERTO J MGR	
Address:	20283 STATE ROAD 7, SUITE 300	
City-St-Zip:	BOCA RATON, FL 33498 US	
Title:	MGR	( ) Delete
Name:	JENKINS, DARRELL MGR	
Address:	5825 CARNEGIE BLVD	
City-St-Zip:	CHARLOTTE, NC 28209 US	
Title:	MGR	( ) Delete
Name:	DAVIES, ALEX J MGR	
Address:	5825 CARNEGIE BLVD	
City-St-Zip:	CHARLOTTE, NC 28209 US	
Title:	MGR	( ) Delete
Name:	KORTE, ERIK MGR	
Address:	QUICKBORNSTRASSE 24	
City-St-Zip:	HAMBURG, HR D-20253 GE	

ADDITIONS/CHANGES:

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

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.

SIGNATURE: ROBERTO J BALL MGR 05/18/2009

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