

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000057698

Entity Name: TED CLINICAL RESEARCH LLC

Current Principal Place of Business:

4659 WEST FLAGLER STREET
MIAMI, FL 33134

Current Mailing Address:

4659 WEST FLAGLER STREET
MIAMI, FL 33134

FEI Number: 45-5160877

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANCHEZ, RAFAEL
800 NE 195 STREET
SUITE # 615
MIAMI, FL 33179 US

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

Authorized Person(s) Detail :

Title MGR
Name SANCHEZ, RAFAEL
Address 800 NE 195 STREET, SUITE # 615
City-State-Zip: MIAMI FL 33179

Title MGR
Name TORRES, WILLIAM
Address 800 NE 195 STREET, SUITE # 615
City-State-Zip: MIAMI FL 33179

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAFAEL SANCHEZ

MGR

02/02/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date