

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002985

Entity Name: PROTEUS MEDICAL L.L.C.

FILED
Feb 18, 2008
Secretary of State

Current Principal Place of Business:

6278 N. FEDERAL HWY #466
FT LAUDERDALE, FL 333081916

New Principal Place of Business:

3098 S OAKLAND FOREST DR
1506
FT LAUDERDALE, FL 33309

Current Mailing Address:

6278 N. FEDERAL HWY #466
FT LAUDERDALE, FL 333081916

New Mailing Address:

FEI Number: 65-0985596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, TIMOTHY M
3098 S OAKLAND FOREST DR #1506
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

MILLS, TIMOTHY M
3098 S OAKLAND FOREST DR
1506
FT LAUDERDALE, FL 33309 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: TIMOTHY M MILLS

02/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MILLS, TIMOTHY M
Address: 3098 S OAKLAND FOREST DR #1506
City-St-Zip: FT. LAUDERDALE, FL 33309

ADDITIONS/CHANGES:

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: TIMOTHY M MILLS

PRES

02/18/2008

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