

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000000783

Entity Name: MICROSPHERIX LLC

**FILED**  
**Feb 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

21283 ROCKLEDGE LANE  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

21283 ROCKLEDGE LANE  
BOCA RATON, FL 33428

**New Mailing Address:**

FEI Number: 65-1093444

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KAPLAN, EDWARD J MD  
21283 ROCKLEDGE LANE  
BOCA RATON, FL 33428 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: MGRM  
Name: KAPLAN, EDWARD MD  
Address: 21283 ROCKLEDGE LANE  
City-St-Zip: BOCA RATON, FL 33428

I hereby 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: EDWARD J KAPLAN MD

CEO

02/22/2010

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