

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013420

Entity Name: MEDICAL INNOVATIONS LLC

FILED  
Apr 19, 2006  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 25032  
SARASOTA, FL 34239

**New Principal Place of Business:**

1637 STATE ST  
SARASOTA, FL 34236

**Current Mailing Address:**

P.O. BOX 25032  
SARASOTA, FL 34239

**New Mailing Address:**

1637 STATE ST  
SARASOTA, FL 34236

FEI Number: 41-2101392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VOELKER, KIRK G  
1485 SIESTA DR.  
SARASOTA, FL 34239 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: VOELKER, KIRK G MGR  
Address: 1485 SIESTA DR  
City-St-Zip: SARASOTA, FL 34239 US

**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 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: KIRK VOELKER

MGR

04/19/2006

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