

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000022591

FILED  
Feb 13, 2002 8:00 AM  
Secretary of State

**Entity Name:** MICRO-MED INDUSTRIES, LLC

**Current Principal Place of Business:**

5169 WEST 12TH STREET  
JACKSONVILLE, FL 32254

**New Principal Place of Business:**

**Current Mailing Address:**

5169 WEST 12TH STREET  
JACKSONVILLE, FL 32254

**New Mailing Address:**

**FEI Number:** 59-3757432

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** ( )

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

SCHEU, FRANCIS M  
5169 WEST 12TH STREET  
JACKSONVILLE, FL 32254

**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/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: SCHEU, FRANCIS M  
Address: 5169 WEST 12TH STREET  
City-St-Zip: JACKSONVILLE, FL 32254 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANCIA M. SCHEU

MGR

02/13/2002

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