

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001870

Entity Name: STONE MEDICAL GROUP, LLC

FILED  
Apr 23, 2012  
Secretary of State

**Current Principal Place of Business:**

1160 S ROGERS CIRCLE SUITE 2  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

1160 S ROGERS CIRCLE SUITE 2  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 01-0589120

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVINE, FREDRICK S MGR  
1160 S. ROGERS CIRCLE  
SUITE 2  
BOCA RATON, FL 33487 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: GORN & ASSOCIATES, INC.  
Address: 9510 GRANDE ESTATES WAY  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM  
Name: BRILLIANT ENTERPRISES, INC.  
Address: 1221 CHENILLE CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: MGRM  
Name: S&D WHOLESAL, INC.  
Address: 411 N. NEW RIVER DRIVE E.  
City-St-Zip: FT. LAUDERDALE, FL 33301

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: FREDRICK LEVINE

MGR

04/23/2012

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