

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012857

FILED
Jan 08, 2007
Secretary of State

Entity Name: FUTURE MEDICAL SOLUTIONS, LLC

Current Principal Place of Business:

5210 LINTON BLVD., #305
DELRAY BEACH, FL 33484

New Principal Place of Business:

4401 N FEDERAL HIGHWAY
SUITE 204
BOCA RATON, FL 33431

Current Mailing Address:

5210 LINTON BLVD., #305
DELRAY BEACH, FL 33484

New Mailing Address:

4401 N FEDERAL HIGHWAY
SUITE 204
BOCA RATON, FL 33431

FEI Number: 01-0693776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHERMAN, ALAN DPM
5210 LINTON BLVD., #305
DELRAY BEACH, FL 33484 US

Name and Address of New Registered Agent:

SHERMAN, ALAN DPM
4401 N FEDERAL HIGHWAY
SUITE 204
BOCA RATON, FL 33431 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: ALAN SHERMAN

01/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHERMAN, ALAN DPM
Address: 5210 LINTON BLVD., SUITE 305
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SHERMAN, ALAN DPM
Address: 4401 N FEDERAL HIGHWAY, #204
City-St-Zip: BOCA RATON, FL 33431

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: ALAN SHERMAN, DPM

MGR

01/08/2007

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