

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020079

Entity Name: TECNOMEDICS, LLC

FILED
Mar 30, 2004
Secretary of State

Current Principal Place of Business:

1725 MAIN STREET
SUITE 205
PEMBROKE PINES, FL 33028

Current Mailing Address:

1725 MAIN STREET
SUITE 205
PEMBROKE PINES, FL 33028

New Principal Place of Business:

13021 NW 1 ST STREET
8-310
PEMBROKE PINES, FL 33028

New Mailing Address:

13021 NW 1 ST STREET
8-310
PEMBROKE PINES, FL 33028

FEI Number: 02-0642954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOVAR, JOSE G
1725 MAIN STREET, SUITE 205
ARIAS TOVAR & ASSOCIATES, P.A.
WESTON, FL 33326

Name and Address of New Registered Agent:

RODRIGUEZ, JOSE M
13021 NW 1 ST STREET
8-310
PEMBROKE PINES, FL 33028

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: JOSE MANUEL RODRIGUEZ CASADIEGO

03/30/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: TRAPP DE GAKNERAS, MARIA KRISTINA
Address: 1725 MAIN STREET, SUITE 205
City-St-Zip: WESTON, FL 33326

Title: MGR () Delete
Name: GAKNERAS OLTUSKA, MANUEL
Address: 1725 MAIN STREET, SUITE 205
City-St-Zip: WESTON, FL 33326

Title: MGR (X) Delete
Name: GAKNERAS DE RODRIGUE, SANDRA ALICIA
Address: 1725 MAIN STREET, SUITE 205
City-St-Zip: MIAMI, FL 33326

Title: MGR (X) Delete
Name: TRAPP SCHULZ, CARMEN SUSANA
Address: 1725 MAIN STREET, SUITE 205
City-St-Zip: WESTON, FL 33326

Title: MGR (X) Delete
Name: RODRIGUEZ, JOSE MANUEL
Address: 1725 MAIN STREET, SUITE 205
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GAKNERAS DE RODRIGUE, SANDRA ALICIA
Address: 13021 NW 1 ST STREET, # 8-310
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR (X) Change () Addition
Name: RODRIGUEZ, JOSE MANUEL
Address: 13021 NW 1 ST STREET, # 8-310
City-St-Zip: PEMBROKE PINES, FL 33028

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JOSE MANUEL RODRIGUEZ

MGR

03/30/2004

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