

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005687

**FILED
Jan 03, 2011
Secretary of State**

Entity Name: E-MEDICAL EDUCATION, LLC

Current Principal Place of Business:

10 EDGEWATER DRIVE
14F
CORAL GABLES, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

10 EDGEWATER DRIVE
14F
CORAL GABLES, FL 33133 US

New Mailing Address:

FEI Number: 26-0058894 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEISZ, MICHEL O ESQ.
200 S. BISCAYNE BLVD
1000
MIAMI, FL 33131 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
Name: GOULD, TAFFY
Address: 10 EDGEWATER DRIVE, 14F
City-St-Zip: CORAL GABLES, FL 33133 US

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: TAFFY GOULD MGR 01/03/2011

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