

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000013672

**FILED**  
**Jun 16, 2009**  
**Secretary of State****Entity Name:** DIPROMED, LLC**Current Principal Place of Business:**1160 S ROGERS CIRCLE  
BOCA RATON, FL 33487**New Principal Place of Business:****Current Mailing Address:**1160 S ROGERS CIRCLE  
BOCA RATON, FL 33487**New Mailing Address:****FEI Number:** 38-3678433**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SOLOMON, MARC I ESQ.  
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 ( ) Delete  
**Name:** KAYCAM ASSOCIATES, LLC  
**Address:** 12312 CASCADES POINT DRIVE  
**City-St-Zip:** BOCA RATON, FL 33428**Title:** MGRM ( ) Delete  
**Name:** GORN & ASSOCIATES, INC.  
**Address:** 9510 GRAND ESTATES WAY  
**City-St-Zip:** BOCA RATON, FL 33496**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** MGRM ( ) Change (X) Addition  
**Name:** S AND D WHOLESALE, INC.  
**Address:** 411 N. NEW RIVER DR E., #2103  
**City-St-Zip:** FT. LAUDERDALE, FL 33301**Title:** MGRM ( ) Change (X) Addition  
**Name:** BRILLIANT ENTERPRISES  
**Address:** 1221 CHENILLE CIRCLE  
**City-St-Zip:** WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify 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:** FREDRICK LEVINE

MGR

06/16/2009

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