


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2006 8:00 am
Secretary of State

02-09-2006 90152 005 ****50.00

DOCUMENT # L04000063128	
1. Entity Name COLL-A-ZOS MED TECH LLC	

Principal Place of Business 3085 DEER CROSSING CT. UNIT # 102 <i>7668 Sicilia Court</i> NAPLES, FL 34114 US	Mailing Address 8816-SOUTH SAN ANDROS ISLE WEST PALM BEACH, FL 33411 US
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01262006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1546608	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COLLAZOS-SPAZIANI, ERIKA
 8816-SOUTH SAN ANDROS ISLE
 WEST PALM BEACH, FL 33411

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Erika C. Spaziani* *Erika C. Spaziani* *01/26/2006*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. SPAZIANI, JOSEPH T 8816-SOUTH SAN ANDROS ISLE WEST PALM BEACH, FL 33411
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DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Erika C. Spaziani* *Erika C. Spaziani* *01/26/2006*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #