2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2007
Secretary of State

DOCUMENT# L04000071023

Entity Name: AYAX MEDICAL, L.L.C.

Current Principal Place of Business:

9130 S. DADELAND BLVD.
SUITE 1600
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9130 S. DADELAND BLVD.
SUITE 1600
MIAMI, FL 33156

New Mailing Address:

FEI Number: 20-1689852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BATISTA, OSVALDO M
9341 CARLYLE AVE. LVD.
SURFSIDE, FL 33154 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: GEA MEDICAL CORP.,
Address: 9130 S. DADELAND BLVD, #1504
City-St-Zip: MIAMI, FL 33156

Title: MGRM ( ) Delete
Name: LUJAMBIO, JULIO A
Address: 417 SOUTH MAIN ST
City-St-Zip: WALLINGFORD, CT 06492

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GEA MEDICAL CORP.,
Address: 9130 S. DADELAND BLVD, #1600
City-St-Zip: MIAMI, FL 33156

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 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: CLAUDIA AVERBUJ PD 04/17/2007

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