

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000092826

Entity Name: MEDASIDESUSA, LLC

**FILED**  
**Apr 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

13506 ALPINE AVENUE  
SEMINOLE, FL 33776

**New Principal Place of Business:**

**Current Mailing Address:**

13506 ALPINE AVENUE  
SEMINOLE, FL 33776

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GONZALES, ALFRED L  
13506 ALPINE AVENUE  
SEMINOLE, FL 33776 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: GONZALES, PAMELA S  
Address: 13506 ALPINE AVENUE  
City-St-Zip: SEMINOLE, FL 33776

Title: MGR  
Name: HUYETT, LOIS M  
Address: 15200 N.W. 112TH AVE  
City-St-Zip: REDDICK, FL 32686

Title: MGR  
Name: GONZALES, ALFRED L  
Address: 13506 ALPINE AVENUE  
City-St-Zip: SEMINOLE, FL 33776

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: ALFRED L GONZALES

AGEN

04/23/2010

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