

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000094152

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** SEDANOS PHARMACY MANAGEMENT, LLC

**Current Principal Place of Business:**

1390 SOUTH DIXIE HWY  
SUITE 2120  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

1430 SOUTH DIXIE HWY  
SUITE 201  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1390 SOUTH DIXIE HWY  
SUITE 2120  
CORAL GABLES, FL 33146

**New Mailing Address:**

2100 SALZEDO STREET  
SUITE 300  
CORAL GABLES, FL 33134

**FEI Number:** 65-0161285

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARAZOZA & FERNANDEZ-FRAGA, P.A.  
2100 SALZEDO STREET STE 300  
CORAL GABLES, FL 33134 US

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

ARAZOZA & FERNANDEZ-FRAGA, P.A.  
2100 SALZEDO STREET  
SUITE 300  
CORAL GABLES, FL 33134 US

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:** ARAZOZA & FERNANDEZ-FRAGA, P.A.  
Electronic Signature of Registered Agent

01/11/2010  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** GUERRA, ARMANDO J  
**Address:** 1430 SOUTH DIXIE HWY SUITE 201  
**City-St-Zip:** CORAL GABLES, FL 33146

**Title:** MGR  
**Name:** CUERVO, LEO  
**Address:** 3900 NORTHWEST 79TH AVENUE SUITE 608  
**City-St-Zip:** MIAMI, FL 33166

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:** ARMANDO J GUERRA MGR 01/11/2010  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date