

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055835

FILED
Jan 20, 2009
Secretary of State

Entity Name: STATISTICAL MEDICAL SOLUTIONS L.L.C.

Current Principal Place of Business:

3287 NW 56TH STREET
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

3287 NW 56TH STREET
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 20-2938508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRELL, RICHARD M
3287 NW 56TH STREET
BOCA RATON, FL 33496 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: MGMR () Delete
Name: HARRELL, RICHARD M
Address: 3287 NW 56TH STREET
City-St-Zip: BOCA RATON, FL 33496

Title: MGMR () Delete
Name: ABENSOUR, DANIEL S
Address: 3287 NW 56TH STREET
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD M HARRELL

MGMR

01/20/2009

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