2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2006
Secretary of State

DOCUMENT# L05000063221

Entity Name: KOPIAN MEDICAL LLC

Current Principal Place of Business:

5801 MARLEON DRIVE
WINDERMERE, FL 34786

New Principal Place of Business:

1016 WEST YALE ST
ORLANDO, FL 32804

Current Mailing Address:

5801 MARLEON DRIVE
WINDERMERE, FL 34786

New Mailing Address:

1016 WEST YALE ST
ORLANDO, FL 32804

FEI Number: 20-3054926 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEEBER, ERIC C
5801 MARLEON DRIVE
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

SEEBER, ERIC C
1016 WEST YALE ST
ORLANDO, FL 32804 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: _____ 02/11/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SEEBER, ERIC C
Address: 5801 MARLEON DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM ( ) Delete
Name: SEEBER, JAIME E
Address: 5801 MARLEON DRIVE
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SEEBER, ERIC C
Address: 1016 WEST YALE ST
City-St-Zip: ORLANDO, FL 32804

Title: MGRM (X) Change ( ) Addition
Name: SEEBER, JAIME E
Address: 1016 WEST YALE ST
City-St-Zip: ORLANDO, FL 32804

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: ERIC SEEBER MGRM 02/11/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date