

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089561

FILED
Jan 04, 2012
Secretary of State

Entity Name: CROWN MEDICAL SYSTEMS LLC

Current Principal Place of Business:

3300 NE 192 ST
PARC CENTRAL I # 712
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

3300 NE 192 ST
PARC CENTRAL I # 712
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 20-3563173 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TELL, MEAH ROTHMAN
4992 NORTH PINE ISLAND ROAD
LAUDERHILL, FL 33351 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
Name: SCHUMER, BRIAN
Address: APARTMENT 712, 3300 N.E. 192ND STREET
City-St-Zip: AVENTURA, FL 33180

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: BRIAN SCHUMER

MGRM

01/04/2012

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