

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000090676

FILED
Apr 26, 2006
Secretary of State

Entity Name: CREATIVE IMPLANT DESIGNS, LLC

Current Principal Place of Business:

4519 US HWY 19
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

4519 US HWY 19
NEW PORT RICHEY, FL 34652 US

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:

ALFRED, TORRENCE W JR
6645 RIDGE ROAD
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

TORRENCE, ALFRED W JR
6645 RIDGE ROAD
PORT RICHEY, FL 34668 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: ALFRED W TORRENCE JR

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CARVALLO, EDWARD MD
Address: 4519 US 19
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES:

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

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: EDWARD CARVALLO MD

MGRM

04/26/2006

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