

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052295

Entity Name: MEDITAX SOLUTIONS, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

9300 S DADELAND BLVD
SUITE 603
MIAMI, FL 33156

Current Mailing Address:

9300 S DADELAND BLVD
SUITE 603
MIAMI, FL 33156

New Principal Place of Business:

2100 PONCE DE LEON BLVD.
1000
CORAL GABLES, FL 33134

New Mailing Address:

2100 PONCE DE LEON BLVD.
1000
CORAL GABLES, FL 33134

FEI Number: 20-4920012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARLADE, JAIME
9300 S DADELAND BLVD
SUITE 603
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

PARLADE, JAIME
2100 PONCE DE LEON BLVD.
1000
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: JAIME PARLADE

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PARLADE, JAIME
Address: 9300 S DADELAND BLVD, SUITE 603
City-St-Zip: MIAMI, FL 33156

Title: MGR () Delete
Name: ADAMS, MAX A
Address: 10650 PARIS STREET
City-St-Zip: COOPER CITY, FL 33026

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PARLADE, JAIME
Address: 13040 SW 70TH AVE.
City-St-Zip: PINECREST, FL 33156

Title: MGRM (X) Change () Addition
Name: ADAMS, MAX A
Address: 10650 PARIS STREET
City-St-Zip: COOPER CITY, FL 33026

Title: MGRM () Change (X) Addition
Name: SCHAEFER, JUSTIN A
Address: 4760 BAY POINT ROAD
City-St-Zip: MIAMI, FL 33137

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: JAIME PARLADE

MGRM

04/22/2009

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