

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052484

Entity Name: 888 MEDICAL SUPPLIES, L.L.C.

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

15519 WEST US HWY 441
SUITE A102
EUSTIS, FL 32726

New Principal Place of Business:

Current Mailing Address:

15519 WEST US HWY 441
SUITE A102
EUSTIS, FL 32726

New Mailing Address:

FEI Number: 20-5262215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANG, HOWARD
2101 PREVATT ST
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

TANG, HOWARD
37734 N. CR 44A
EUSTIS, FL 32736 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:

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TANG, STEVEN
Address: 2101 PREVATT STREET
City-St-Zip: EUSTIS, FL 32726

Title: MGRM (X) Delete
Name: TANG, SIM K
Address: 2101 PREVATT STREET
City-St-Zip: EUSTIS, FL 32726

Title: MGRM () Delete
Name: TANG, HOWARD
Address: 2101 PREVATT STREET
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: TANG, HOWARD
Address: 37734 N CR 44A
City-St-Zip: EUSTIS, FL 32736

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: HOWARD TANG

MGRM

04/07/2009

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