

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009980

Entity Name: SURGICAM TECHNOLOGIES, LLC

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

12551 INDIAN ROCKS RD
STE 14
LARGO, FL 33774

New Principal Place of Business:

7777 131ST ST
STE 4/5
SEMINOLE, FL 33776

Current Mailing Address:

12551 INDIAN ROCKS RD
STE 14
LARGO, FL 33774

New Mailing Address:

7777 131ST ST
STE 4/5
SEMINOLE, FL 33776

FEI Number: 20-8328682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANDT, ERICH
19823 GULF BLVD
#40
INDIAN SHORES, FL 33785 US

Name and Address of New Registered Agent:

BRANDT, ERICH
16130 6TH ST EAST
REDINGTON BEACH, FL 33708 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:

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: BRANDT, ERICH B
Address: 19823 GULF BLVD #40
City-St-Zip: INDIAN SHORES, FL 33785

Title: SEC () Delete
Name: GARCIA, NELSON
Address: 701 S MADISON ST #302
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: BRANDT, ERICH B
Address: 16130 6TH ST EAST
City-St-Zip: REDINGTON BEACH, FL 33708

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

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: ERICH BRANDT

PRES

01/15/2009

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