2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# L07000056525

Entity Name: CONEL MEDICAL LLC

Current Principal Place of Business:

10214 SW 58 ST.
COOPER CITY, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

10214 SW 58 ST.
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 14-1999974 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RODRIGUEZ, PASCALE
10214 SW 58 ST.
COOPER CITY, FL 33328 US

Name and Address of New Registered Agent:

RODRIGUEZ, JUAN
10214 SW 58 ST.
COOPER CITY, FL 33328 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: JUAN RODRIGUEZ 03/20/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RODRIGUEZ, PASCALE
Address: 10214 SW 58 ST.
City-St-Zip: COOPER CITY, FL 33328 US

Title: MGRM ( ) Delete
Name: RODRIGUEZ, JUAN
Address: 10214 SW 58 ST.
City-St-Zip: COOPER CITY, FL 33328 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RODRIGUEZ, JUAN
Address: 10214 SW 58 ST.
City-St-Zip: COOPER CITY, FL 33328 US

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: JUAN RODRIGUEZ MGRM 03/20/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date