

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000058278

FILED
Apr 10, 2009
Secretary of State

Entity Name: WORLD DISASTER & EMERGENCY MEDICAL SERVICE, LLC

Current Principal Place of Business:

9715 W. BROWARD BLVD.
SUITE 163
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

9715 W. BROWARD BLVD.
SUITE 163
PLANTATION, FL 33324 US

New Mailing Address:

9715 W. BROWARD BLVD.
SUITE 163
PLANTATION, FL 33324

FEI Number: 26-0662026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, GARY CPA
7152 NW 71ST TERRACE
PARKLAND, FL 33067 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PASTERNAK, CAROL
Address: P.O. BOX 290763
City-St-Zip: DAVIE, FL 33329 US

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 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: CAROL PASTERNAK

MGRM

04/10/2009

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