

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063816

FILED
Apr 23, 2009
Secretary of State

Entity Name: PRECISE RX INNOVATION, LLC

Current Principal Place of Business:

19263 SW 5TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

19263 SW 5TH STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 26-0388533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.
8875 HIDDEN RIVER PKWY STE 300
TAMPA, FL 33637 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: WILSON, DAVID S
Address: 19263 SW 5TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: ORTIZ, TERESITA
Address: 19263 SW 5TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES:

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

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: DAVID SCOTT WILSON

VP

04/23/2009

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