

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000070480

Entity Name: MEDICOLLAB, LLC

FILED
Jan 11, 2011
Secretary of State

Current Principal Place of Business:

2605 WEST ATLANTIC AVE
SUITE D-204
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

2605 WEST ATLANTIC AVE
SUITE D-204
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 26-0491415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRASSWIMMER, JOHN M DR
2605 WEST ATLANTIC AVE
DELRAY BEACH, FL 33445 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: PD
Name: STRASSWIMMER, JOHN M
Address: 240 SUNSET RD
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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: JOHN STRASSWIMMER

PD

01/11/2011

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