2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2011
Secretary of State

DOCUMENT# L07000093601

Entity Name: MODUS HEALTHCARE INTERNATIONAL, LLC

Current Principal Place of Business:

ONE TAMPA CITY CENTER, SUITE 1825
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

ONE TAMPA CITY CENTER
SUITE 1825
TAMPA, FL 33602

New Mailing Address:

FEI Number: 26-4350909 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLARKE, PHILIP K ESQ
1505 N FLORIDA AVE
TAMPA, FL 33601 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: MGR
Name: YESSIN, BRENT W
Address: ONE TAMPA CITY CENTER, SUITE 1825
City-St-Zip: TAMPA, FL 33602

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 Statues.

SIGNATURE: BRENT YESSIN MGR 02/28/2011

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