

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000116385

**Entity Name:** U.S. IMPLANTS SOLUTIONS-LEEFS, LLC

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1106 ERMINE AVENUE  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 623677  
OVIEDO, FL 327623677

**New Mailing Address:**

FEI Number: 26-2821725      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARRETT, SCOTT  
1106 ERMINE AVENUE  
WINTER SPRINGS, FL 32708 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: GARRETT, SCOTT  
Address: 1106 ERMINE AVENUE  
City-St-Zip: WINTER SPRINGS, FL 32708

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: SCOTT GARRETT

MGR

03/22/2011

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