

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000126322

FILED
Aug 29, 2008
Secretary of State

Entity Name: SAFETY MEDICAL SYSTEMS LLC

Current Principal Place of Business:

2640 S.W. 137 TERRACE
DAVIE, FL 33330 US

New Principal Place of Business:

Current Mailing Address:

2640 S.W. 137 TERRACE
DAVIE, FL 33330 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BRUDER, HUGH
2640 S.W. 137 TERRACE
DAVIE, FL 33330 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: BRUDER, HUGH
Address: 2640 S.W. 137 TERRACE
City-St-Zip: DAVIE, FL 33330 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: COO () Change (X) Addition
Name: BRUDER, JACKIE
Address: 2640 SW 137 TERRACE
City-St-Zip: DAVIE, FL 33330 US

Title: PRES () Change (X) Addition
Name: MIKULSKIS, BENJAMIN
Address: 3925 ARTHUR STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: CFO () Change (X) Addition
Name: MIKULSKIS, MICHELLE
Address: 3925 ARTHUR STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: HUGH BRUDER

MGRM

08/29/2008

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