2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 14, 2009
Secretary of State

DOCUMENT# L07000127671

Entity Name: FEINSTEIN MEDICAL, LLC

Current Principal Place of Business:

4205 WEST ATLANTIC AVENUE
BUILDING B
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

3822 EAGLE COURT
WESTON, FL 33331

New Mailing Address:

4205 WEST ATLANTIC AVENUE
BUILDING B
DELRAY BEACH, FL 33445

FEI Number: 26-1637814 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

FEINSTEIN, STACY L
7501 N.W. 4TH STREET
SUITE 208
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

FEINSTEIN, STACY L
4205 WEST ATLANTIC AVENUE
SUITE 201
DELRAY BEACH, FL 33445 US

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: STACY FEINSTEIN 09/14/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: FEINSTEIN, BRIAN J
Address: 4205 WEST ATLANTIC AVENUE, BLDG. B
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES:

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: BRIAN FEINSTEIN DR. 09/14/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date