

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000024395

Entity Name: GENESIS MEDICUS, LLC

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1880 NW 97TH AVENUE  
FORT LAUDERDALE, FL 33322 US

**New Principal Place of Business:**

11645 BISCAYNE BLVD  
SUITE 307  
NORTH MIAMI, FL 33181 US

**Current Mailing Address:**

1880 NW 97TH AVENUE  
FORT LAUDERDALE, FL 33322 US

**New Mailing Address:**

FEI Number: 26-2121573      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

AYALA, JACINTO L SR.  
1880 NW 97TH AVENUE  
FORT LAUDERDALE, FL 33322 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  
Name: AYALA, JACINTO L SR.  
Address: 1880 NW 97TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33322 US

Title: MGR  
Name: DORN-AYALA, JOYCE P  
Address: 1880 NW 97 AVE  
City-St-Zip: PLANTATION, FL 33322 US

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: JACINTO L AYALA

MGRM

01/06/2012

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