

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000026889

FILED
Apr 20, 2009
Secretary of State

Entity Name: NATIONAL PHARMACEUTICALS AND MEDICAL PRODUCTS (USA), LLC

Current Principal Place of Business:

13650 NW 8TH STREET, SUITE 109
SUNRISE, FL 33325

New Principal Place of Business:

13650 NW 8TH STREET, SUITE 109
SUNRISE, FL 33325 US

Current Mailing Address:

13650 NW 8TH STREET, SUITE 109
SUNRISE, FL 33325

New Mailing Address:

13650 NW 8TH STREET, SUITE 109
SUNRISE, FL 33325 US

FEI Number: 26-2411500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: RAJANI, JATIN
Address: 13650 NW 8TH ST STE. 109
City-St-Zip: SUNRISE, FL 33325 US

Title: MGRM () Change (X) Addition
Name: UNITED STATES PHARMACEUTICAL GROUP, LLC
Address: 13650 NW 8TH ST. STE. 109
City-St-Zip: SUNRISE, FL 33325 US

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: JATIN RAJANI

MGRM

04/20/2009

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