## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039110

Entity Name: ATRICO HEALTHCARE PRODUCTS, LLC

FILED May 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

18851 NE 29TH AVENUE, STE 900 201 S. BISCAYNE BLVD. AVENTURA, FL 33180

SUITE 905 MIAMI, FL 33131

**Current Mailing Address: New Mailing Address:** 

18851 NE 29TH AVENUE, STE 900 201 S. BISCAYNE BLVD.

AVENTURA, FL 33180 SUITE 905 MIAMI, FL 33131

FEI Number: 26-3160779 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: Name and Address of New Registered Agent:

LEONARD ROTH, ESQ. LEONARD ROTH, ESQ. 18851 NE 29TH AVENUE. STE 900 RM ATTORNEYS AT LAW PA ROTH, ROUSSO & KATSMAN, LLP 201 S. BISCAYNE BLVD. SUITE 905 AVENTURA, FL 33180 US MIAMI, FL 33131 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: LEONARD ROTH 05/01/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change ( ) Addition CARLOS CASTANON, JUAN CARLOS CASTANON, JUAN Name: Name:

Address: 18851 NE 29TH AVENUE, STE 900 Address: 201 S. BISCAYNE BLVD. SUITE 905

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: MIAMI, FL 33131

(X) Change ( ) Addition Title: MGR () Delete Title: MGR

Name: SENIOR, EDUARDO Name: SENIOR, EDUARDO

Address: 18851 NE 29TH AVENUE, STE 900 Address: 201 S. BISCAYNE BLVD. SUITE 905

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: MIAMI, FL 33131

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: CARLOS CASTANON JUAN 05/01/2009