

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045701

FILED
May 01, 2009
Secretary of State

Entity Name: U.S. IMPLANT SOLUTIONS-CHANDRAN, LLC

Current Principal Place of Business:

650 SOUTH CENTRAL AVENUE
OVIEDO, FL 32765

New Principal Place of Business:

650 SOUTH CENTRAL AVENUE
#1000
OVIEDO, FL 32765

Current Mailing Address:

650 SOUTH CENTRAL AVENUE
OVIEDO, FL 32765

New Mailing Address:

650 SOUTH CENTRAL AVENUE
#1000
OVIEDO, FL 32765

FEI Number: 26-2883643 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:

MEIER, GREGORY W ESQ
SHUFFIELD LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: MGR () Delete
Name: GARRETT, SCOTT
Address: 650 SOUTH CENTRAL AVENUE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BELL, ROBERT R
Address: 650 SOUTH CENTRAL AVENUE #1000
City-St-Zip: OVIEDO, FL 32765

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: ROBERT R BELL

MGR

05/01/2009

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