

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058713

FILED
Apr 15, 2009
Secretary of State

Entity Name: DIABETES LIVING SYSTEMS, LLC

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE
SUITE 260
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

5201 BLUE LAGOON DRIVE
SUITE 260
MIAMI, FL 33126

New Mailing Address:

FEI Number: 33-1217442 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNO, CELIA E
5201 BLUE LAGOON DRIVE
SUITE 260
MIAMI, FL 33126 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 () Delete
Name: PLANA, NESTOR
Address: 5201 BLUE LAGOON DRIVE, SUITE 260
City-St-Zip: MIAMI, FL 33126 US

Title: MGRM () Delete
Name: HARPER, FLOYD
Address: 5201 BLUE LAGOON DRIVE, SUITE 260
City-St-Zip: MIAMI, FL 33126 US

Title: MGRM () Delete
Name: NOONAN, RAYMOND
Address: 5201 BLUE LAGOON DRIVE, SUITE 260
City-St-Zip: MIAMI, FL 33126 US

Title: MGRM () Delete
Name: HARKINS, JOHN
Address: 5201 BLUE LAGOON DRIVE, SUITE 260
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FLOYD HARPER

MGRM

04/15/2009

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