

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000078795

Entity Name: THONERA MEDICAL, LLC

FILED
Jan 07, 2011
Secretary of State

Current Principal Place of Business:

5521 S.W. 6TH STREET
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

5521 S.W. 6TH STREET
PLANTATION, FL 33317

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHIPAT-LEE, NERA
5521 S.W. 6TH STREET
PLANTATION, FL 33317 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: MAHIPAT-LEE, NERA
Address: 5521 S.W. 6TH STREET
City-St-Zip: PLANTATION, FL 33317

Title: MGRM
Name: LEE, THOMAS G
Address: 5521 S.W. 6TH STREET
City-St-Zip: PLANTATION, FL 33317

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: NERA MAHIPAT-LEE

MNGR

01/07/2011

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