

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000111590

Entity Name: COMPLETE MEDICAL, LLC

FILED
Jan 13, 2010
Secretary of State

Current Principal Place of Business:

4400 NORTH FEDERAL HWY STE 101
LIGHTHOUSE POINT, FL 33064 US

New Principal Place of Business:

123 NW 13TH STREET
304-04
BOCA RATON, FL 33432 US

Current Mailing Address:

4400 NORTH FEDERAL HWY STE 101
LIGHTHOUSE POINT, FL 33064 US

New Mailing Address:

123 NW 13TH STREET
304-04
BOCA RATON, FL 33432 US

FEI Number: 26-3866637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERMAN, ALLISON
4400 NORTH FEDERAL HWY STE 101
LIGHTHOUSE POINT, FL 33064 US

Name and Address of New Registered Agent:

SILVERMAN, ALLISON
123 NW 13TH STREET
304-04
BOCA RATON, FL 33432 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: ALLISON SILVERMAN

01/13/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SILVERMAN, ALLISON
Address: 17762 LAKE AZURE WAY
City-St-Zip: BOCA RATON, FL 33496 US

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: ALLISON SILVERMAN

MGR

01/13/2010

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