

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000114493

Entity Name: EUROMED GROUP, LLC

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

17071 WEST DIXIE HIGHWAY  
SUITE A10  
AVENTURA, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

17071 WEST DIXIE HIGHWAY  
SUITE A10  
AVENTURA, FL 33160

**New Mailing Address:**

FEI Number: 06-1579326

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ROSEN, PHILIP C ESQ.  
8551 WEST SUNRISE BLVD.  
SUITE 208  
FT. LAUDERDALE, FL 33322 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: ROSEN, SCOTT J  
Address: 17071 WEST DIXIE HIGHWAY SUITE A10  
City-St-Zip: AVENTURA, FL 33160

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: SCOTT ROSEN

MGR

04/01/2010

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