2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jun 21, 2011
Secretary of State

DOCUMENT# L09000012135

Entity Name: QUALITY MEDICAL PRODUCTS, LLC

Current Principal Place of Business:

5180 WEST ATLANIC AVE.
105
DELRAY BEACH, FL 33484 US

New Principal Place of Business:

Current Mailing Address:

5180 WEST ATLANIC AVE.
105
DELRAY BEACH, FL 33484 US

New Mailing Address:

FEI Number: 26-4203007 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOBLICK, DAVID
5180 WEST ATLANIC AVE.
DELRAY BACH, FL 33484 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: SOBLICK, DAVID
Address: 5180 WEST ATLANIC AVE.
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: MGRM
Name: ARONOFF, KEITH SOBLICK
Address: 5180 WEST ATLANIC AVE.
City-St-Zip: DELRAY BEACH, FL 33484 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 Statues.

SIGNATURE: JORDAN SOBLICK MGMR 06/21/2011

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