2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

DOCUMENT# L09000028358

Entity Name: SCAPS MEDICAL, LLC

Current Principal Place of Business:

649 US HIGHWAY ONE
SUITE 2
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

649 US HIGHWAY ONE
SUITE 2
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

13527 49TH STREET N
WEST PALM BEACH, FL 33411 US

FEI Number: 26-4649186 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DELTOR, DOMINIQUE
13527 49TH STREET N
W PALM BEACH, FL 33411 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: MGR
Name: DELTOR, PIERRE
Address: 13527 49TH STREET N
City-St-Zip: W PALM BEACH, FL 33411 US

Title: MGR
Name: DELTOR, DOMINIQUE C
Address: 13527 49TH STREET N
City-St-Zip: W PALM BEACH, FL 33411 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: PIERRE DELTOR MGR 01/04/2012

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