2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

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Entity Name: SOLERA HEALTH SYSTEMS LLC

Current Principal Place of Business:

2151 S. LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2151 S. LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 26-4764588 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, NICOLAS R DR.
2151 S. LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL, FL 33134 US

Name and Address of New Registered Agent:

ALVAREZ, NICOLAS R DR.
2151 S. LE JEUNE ROAD
SUITE 202
CORAL GABLES, FL 33134 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: _____ 01/06/2010
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ALVAREZ, NICOLAS R DR.
Address: 2151 S. LE JEUNE ROAD , SUITE 202
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM
Name: ALVAREZ, CLAUDIO R
Address: 2151 S. LE JEUNE ROAD, SUITE 202
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM
Name: ALVAREZ DE SOLO, CRISTINA
Address: 2151 S. LE JEUNE ROAD, SUITE 202
City-St-Zip: CORAL GABLES, FL 33134

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: NICOLAS R. ALVAREZ MGRM 01/06/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date