

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000042370

FILED  
Mar 09, 2010  
Secretary of State

Entity Name: ADVANCED MED SOLUTIONS LLC

**Current Principal Place of Business:**

2600 DOUGLAS ROAD, SUITE 1010-A  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

3621 SW 37TH AVE  
MIAMI, FL 33133

**Current Mailing Address:**

2600 DOUGLAS ROAD, SUITE 1010-A  
CORAL GABLES, FL 33134

**New Mailing Address:**

3621 SW 37TH AVE  
MIAMI, FL 33133

FEI Number: 27-0172530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

LLUCH, JAVIER I MNG DIR  
3621 SW 37TH AVE  
MIAMI, FL 33133 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: JAVIER I. LLUCH

03/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RON, JOSE A  
Address: 2600 DOUGLAS ROAD, SUITE 1010-A  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR  
Name: LLUCH, JAVIER  
Address: 3621 SW 37TH AVE  
City-St-Zip: MIAMI, FL 33133

Title: S  
Name: RON, JOSE A  
Address: 2600 DOUGLAS ROAD, SUITE 1010-A  
City-St-Zip: CORAL GABLES, FL 33134

Title: T  
Name: LLUCH, JAVIER  
Address: 3621 SW 37TH AVE  
City-St-Zip: MIAMI, FL 33133

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: JAVIER I. LLUCH

MNG

03/09/2010

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