2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2010
Secretary of State

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Entity Name: INFLAMACORE LIMITED LIABILITY COMPANY

Current Principal Place of Business:

1600 NWTH AVE (R-430)
MIAMI, FL 33136

New Principal Place of Business:

1600 NWTH AVE (R-430)
RMSB 5058 (R-430)
MIAMI, FL 33136

Current Mailing Address:

1600 NWTH AVE (R-430)
MIAMI, FL 33136

New Mailing Address:

1600 NWTH AVE (R-430)
RMSB 5058 (R-430)
MIAMI, FL 33136

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

Name and Address of Current Registered Agent:

GREENE & SANDERS, P.A.
800 SW 8TH ST
STE 2550
MIAMI, FL 33130 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: KEANE, ROBERT W
Address: 1600 NWTH AVE (R-430)
City-St-Zip: MIAMI, FL 33136

Title: MGRM
Name: DIETRICH, W. DALTON W
Address: 1095 NW 14TH TERRACE
City-St-Zip: MIAMI, FL 33136

Title: MGRM
Name: DE RIVERO VACCARI, JUAN PABLO
Address: 1095 NW 14TH TERRACE
City-St-Zip: MIAMI, FL 33136

Title: MGRM
Name: BRAMLETT, HELEN M
Address: 1095 NW 14TH TERRACE
City-St-Zip: MIAMI, FL 33136

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: ROBERT W. KEANE DR. 01/21/2010

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