

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000010290

Entity Name: XEREX PHARMACEUTICALS, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

6280 SUNSET DRIVE #500  
MIAMI, FL 33143

## **New Principal Place of Business:**

6280 SUNSET DRIVE  
SUITE 500  
MIAMI, FL 33143

## **Current Mailing Address:**

6280 SUNSET DRIVE #500  
MIAMI, FL 33143

## **New Mailing Address:**

6280 SUNSET DRIVE  
#500  
MIAMI, FL 33143

FEI Number: 61-1627526

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COLSKY, ARTHUR S  
5430 SUNSET DRIVE  
MIAMI, FL 33143 US

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

COLSKY, ARTHUR S  
6280 SUNSET DRIVE  
500  
MIAMI, FL 33143 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:

01/05/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: COLSKY, ARTHUR S  
Address: 6280 SUNSET DRIVE, #500  
City-St-Zip: MIAMI, FL 33143

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: ARTHUR S COLSKY MD PHD

DR.

01/05/2012

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