

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000050244

Entity Name: OA MEDICAL LLC

FILED
May 01, 2012
Secretary of State

Current Principal Place of Business:

911 N. ORANGE AVE.
451
ORLANDO, FL 32801

New Principal Place of Business:

911 N. ORANGE AVE.
451
ORLANDO, FL 32801 US

Current Mailing Address:

911 N. ORANGE AVE.
451
ORLANDO, FL 32801

New Mailing Address:

911 N. ORANGE AVE.
451
ORLANDO, FL 32801 US

FEI Number: 32-0321919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALFARO, ORLANDO
911 N. ORANGE AVE.
451
ORLANDO, FL 32801 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: PRES
Name: ALFARO, ORLANDO
Address: 911 N. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801 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 Statutes.

SIGNATURE: ORLANDO ALFARO

PRES

05/01/2012

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