2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2011
Secretary of State

DOCUMENT# L10000058949

Entity Name: MD- MEDICAL DEVICE, LLC

Current Principal Place of Business:

301 NW 36 STREET
MIAMI, FL 33127 US

New Principal Place of Business:

Current Mailing Address:

301 NW 36 STREET
MIAMI, FL 33127 US

New Mailing Address:

FEI Number: 27-3004565 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHAPIRO, CRAIG B ESQ.
255 UNIVERSITY DRIVE
CORAL GABLES, FL 33134 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: MGR
Name: DELLUTRI, SALVATORE
Address: 301 NW 36 STREET
City-St-Zip: MIAMI, FL 33127

Title: MGR
Name: DELLUTRI, MARIA ELENA
Address: 301 NW 36 STREET
City-St-Zip: MIAMI, FL 33127 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 Statues.

SIGNATURE: MARIA ELENA DELLUTRI MGR 01/07/2011

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