

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000096655

Entity Name: MEDTRUST PLUS, LLC

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2500 SW 107TH AVE  
STE 40  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

2500 SW 107TH AVE  
STE 40  
MIAMI, FL 33165

**New Mailing Address:**

FEI Number: 27-4174377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SASSO, PAUL R ESQ  
7721 SW 62ND AVE  
STE 202  
S MIAMI, FL 33143 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: DE LA TORRE, ROSA  
Address: 2500 SW 107TH AVE  
City-St-Zip: MIAMI, FL 33165

Title: MGRM  
Name: PRIMARY MANAGEMENT RESOURCES, INC  
Address: 2668 RIVIERA MANOR  
City-St-Zip: WESTON, FL 33332

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: ROSA DE LA TORRE

MGRM

01/19/2011

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