

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000104694

FILED
Apr 06, 2011
Secretary of State

Entity Name: MEDICAL & DENTAL EQUIPMENT SUPPLY, LLC

Current Principal Place of Business:

11002 NW 83 STREET
206
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

11002 NW 83 STREET
206
DORAL, FL 33178

New Mailing Address:

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

Name and Address of Current Registered Agent:

ANGULO, ANA M
5975 SUNSET DRIVE
503
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: MGR
Name: MAVAREZ, LISSET
Address: 11002 NW 83 STREET #206
City-St-Zip: DORAL, FL 33178

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: LISSET MAVAREZ MGR 04/06/2011

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