

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000115646

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** MED-TRUST MANAGEMENT, LLC

**Current Principal Place of Business:**

7600 WEST 20TH AVENUE, SUITE #218  
HIALEAH, FL 33016

**New Principal Place of Business:**

7600 WEST 20TH AVENUE, SUITE #213  
HIALEAH, FL 33016

**Current Mailing Address:**

7600 WEST 20TH AVENUE, SUITE #218  
HIALEAH, FL 33016

**New Mailing Address:**

7600 WEST 20TH AVENUE, SUITE #213  
HIALEAH, FL 33016

**FEI Number:** 27-4007218

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TALAMO, JAVIER  
7600 WEST 20TH AVENUE, SUITE #218  
HIALEAH, FL 33016 US

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

TALAMO, JAVIER  
7600 WEST 20TH AVENUE, SUITE #213  
HIALEAH, FL 33016 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:

04/29/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TALAMO, JAVIER  
Address: 18520 NW 67 AVENUE #200  
City-St-Zip: HIALEAH, FL 33015

Title: MGRM  
Name: RIBAS, ROGER  
Address: 18520 NW 67 AVENUE #200  
City-St-Zip: HIALEAH, FL 33015

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: JAVIER TALAMO

MGRM

04/29/2011

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