

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000045010

Entity Name: IMEDLOGIC,"LLC"

**FILED**  
**Feb 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10361 NW 18TH MANOR  
PLANTATION, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

10361 NW 18TH MANOR  
PLANTATION, FL 33322

**New Mailing Address:**

FEI Number: 45-1999408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELKIN, JEFFREY  
10361 NW 18TH MANOR  
PLANTATION, FL 33322 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: ARZE, ALLEN  
Address: 10511 SW 42 STREET  
City-St-Zip: MIAMI, FL 33165 US

Title: MGRM  
Name: ELKIN, JEFFREY  
Address: 10361 NW 18TH MANOR  
City-St-Zip: PLANTATION, FL 33322 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: JEFFREY ELKIN

MGRM

02/29/2012

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