

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000100530

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** REHAB LONDON DISTRIBUTORS USA, LLC

**Current Principal Place of Business:**

7731 SALEM LANE  
PARKLAND, FL 33067

**New Principal Place of Business:**

7731 SALEM LANE  
PARKLAND, FL 33067 US

**Current Mailing Address:**

7731 SALEM LANE  
PARKLAND, FL 33067

**New Mailing Address:**

7731 SALEM LANE  
PARKLAND, FL 33067 US

**FEI Number:** 45-3194870

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRAMER & RASSNER, P.A.  
7700 N. KENDALL DRIVE  
SUITE 509  
MIAMI, FL 33156 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: ALMOND, LESLIE  
Address: 1112 WESTON ROAD, SUITE 125  
City-St-Zip: WESTON, FL 33326

Title: MGRM  
Name: SCHEINER, J. DAVID  
Address: 8180 ERWIN DRIVE  
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM  
Name: RASSNER, GLENN M  
Address: 7731 SALEM LANE  
City-St-Zip: PARKLAND, FL 33067

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: LESLIE ALMOND

MGRM

02/24/2012

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