

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000103913

FILED
Jul 20, 2012
Secretary of State

Entity Name: WESTERN ENVIRONMENTAL & MEDICAL SUPPLIES, LLC.

Current Principal Place of Business:

13009 LEEDS COURT
TAMPA, FL 33612

New Principal Place of Business:

13009 LEEDS COURT
D7
TAMPA, FL 33612

Current Mailing Address:

13009 LEEDS COURT
TAMPA, FL 33612

New Mailing Address:

13009 LEEDS COURT
D7
TAMPA, FL 33612

FEI Number: 45-3275949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OTI, DOUGLAS
13009 LEEDS COURT
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

OTI, DOUGLAS
13009 LEEDS COURT
D7
TAMPA, FL 33612 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: DOUGLAS OTI

07/20/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: OTI, DOUGLAS
Address: 13009 LEEDS COURT
City-St-Zip: TAMPA, FL 33612

Title: MGRM
Name: OTI, IVY
Address: WESTERN SURGICALS PO BOX TD1102
City-St-Zip: TAKORADI, GHANA, XX

Title: MGR
Name: OTI, DOUGLAS
Address: 13009 LEEDS COURT
City-St-Zip: TAMPA, FL 33612

Title: MGR
Name: OTI, IVY
Address: WESTERN SURGICALS PO BOX TD1102
City-St-Zip: TAKORADI, GHANA, XX

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: DOUGLAS OTI

MGRM

07/20/2012

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