## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L97000000863

8525 SW 92ND ST.

( ) Delete

SOUTH MIAMI, FL

VITIELLO, MARIO

MIAMI, FL 33143

7575 SW 62ND AVE #B

Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

Entity Name: DADEMED, L.C.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
1200 S. PINE ISLAND RD. SUITE 320 PLANTATION, FL 33324			SUITE 314	300 S. PINE ISLAND RD. SUITE 314 PLANTATION, FL 33324	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
1200 S. PINE ISLAND RD. SUITE 320 PLANTATION, FL 33324			SUITE 314	300 S. PINE ISLAND RD. SUITE 314 PLANTATION, FL 33324	
FEI Number:	65-0774920	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
201 SOUTI 20TH FL MIAMI, FL	H BISCAYNE B 33131 US				
	named entity s of Florida.	ubmits this statement for the pu	rpose of changing its regist	ered office or registered agent, or both	
SIGNATUR					
	Electroni	c Signature of Registered Agen	t	Date	
MANAGING MEMBERS/MEMBERS:			ADDITIONS/CHAI	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () MELLA, JUAN N 8950 N. KENDAI MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () BARRERA, CAR 7400 N. KENDAI MIAMI, FL 3315	_L DR., #507	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () BRETON, CRIST 7400 S.W. 88TH MIAMI, FL 3315	I ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BAYLESS, THO	AND ROAD, #320	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR () SOBRADO, JAV	Delete IER MD	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

(X) Change ( ) Addition

VITIELLO, MARCO

MIAMI, FL 33143

7575 SW 62ND AVE #B

SIGNATURE: THOMAS R. BAYLESS MGR 04/28/2004