

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007829

Entity Name: EVEREST MEDICAL L.C.

FILED  
Jan 07, 2010  
Secretary of State

**Current Principal Place of Business:**

12581 S.W. 134 COURT  
SUITE 104  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 566254  
PINECREST, FL 33256 US

**New Mailing Address:**

FEI Number: 65-0971403

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DEL RIO PEREZ, LAURA SEC.  
12581 S.W. 134 COURT  
SUITE 104  
MIAMI, FL 33186 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: PEREZ, MANUEL PRES.  
Address: 12581 S.W. 134 COURT - SUITE 104  
City-St-Zip: MIAMI, FL 33186 US

Title: MGR  
Name: DEL RIO PEREZ, LAURA V P  
Address: 12581 S.W. 134 COURT - SUITE 104  
City-St-Zip: MIAMI, FL 33186 US

Title: MGRM  
Name: DEL RIO PEREZ, LAURA SEC  
Address: 12581 S.W. 134 COURT - SUITE 104  
City-St-Zip: MIAMI, FL 33186 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: LAURA DEL RIO PEREZ

MGR

01/07/2010

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