2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# M04000000651

Entity Name: MEDSTAR SYSTEMS, LLC

Current Principal Place of Business:

3115 NW 10TH TERRACE SUITE 104
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3115 NW 10TH TERRACE SUITE 104
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LALAGUNA, PABLO
1410 POLK STREET
HOLLYWOOD, FL 33020 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: MGR ( ) Delete
Name: VALLS, JUAN CARLOS
Address: 3700 GALT OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR ( ) Delete
Name: VALLS, EMILIO
Address: 27 FOXHURST LANE
City-St-Zip: MANHASSET, NY 11030

Title: MGR ( ) Delete
Name: LALAGUNA, PABLO
Address: 1410 POLK ST
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: EMILIO VALLS MGR 01/03/2008

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