

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000007008

FILED  
Jul 11, 2006  
Secretary of State

Entity Name: MEDARC LLC

**Current Principal Place of Business:**

2741 VISTA WAY #105  
C/O ROBERT J MINTZ ESQ.  
OCEANSIDE, CA 92054

**New Principal Place of Business:**

**Current Mailing Address:**

2741 VISTA WAY #105  
C/O ROBERT J MINTZ ESQ.  
OCEANSIDE, CA 92054

**New Mailing Address:**

FEI Number: 77-0630080      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

HUSZAR, LESLIE A MD  
787 37TH STREET SUITE E-120  
VERO BEACH, FL 32960 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HUSZAR, BRIAN A  
Address: 2741 VISTA WAY #105  
City-St-Zip: OCEANSIDE, CA 92054

Title: MGRM ( ) Delete  
Name: HUSZAR, LESLIE A  
Address: 2741 VISTA WAY #105  
City-St-Zip: OCEANSIDE, CA 92054

**ADDITIONS/CHANGES:**

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 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: LESLIE HUSZAR

MANA

07/11/2006

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