



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR **2011**

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

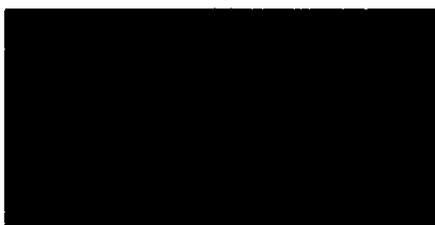
1. Entity ID No. 154521		2. Exact name of the limited liability company UNETIXS VASCULAR INTERNATIONAL, LLC			
3. State of Formation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island DISTRIBUTION AND SALE OF MEDICAL EQUIPMENTS			
5. Principal office address 125 COMMERCE PARK ROAD			City NORTH KINGSTOWN	State RI	Zip 02852
Contact Name ARVIND MANJEGOWDA			Contact Title SECRETARY		
Street Address N7W22025 JOHNSON DR.			City WAUKESHA	State WI	Zip 53186
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.

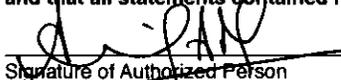
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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

 06/11/12
 Signature of Authorized Person Date

ARVIND MANJEGOWDA
 Print or Type Name of Authorized Person