

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009078

FILED
Apr 20, 2009
Secretary of State

Entity Name: MENSCIENCE ANDROCEUTICALS LLC

Current Principal Place of Business:

280 WOODCREST RD
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

280 WOODCREST RD
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 01-0723378 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, FEDERICO
280 WOODCREST RD
KEY BISCAYNE, FL 33149 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 () Delete
Name: L.I.C. CAPITAL LLC
Address: 280 WOODCREST RD.
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR () Delete
Name: SANCHEZ, CRISTINA
Address: 102 NE 103 ST
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: MGR () Delete
Name: SANNIA, CHRISTIAN
Address: 435 RIDGEWOOD RD.
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: CHRISTIAN SANNIA

MR.

04/20/2009

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