

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081437

FILED
Mar 27, 2006
Secretary of State

Entity Name: MALIBU HEALTHCARE LIMITED LIABILITY COMPANY

Current Principal Place of Business:

3170 N FEDERAL HIGHWAY
SUITE 103-H
LIGHTHOUSE POINT, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

3170 N FEDERAL HIGHWAY
SUITE 103-H
LIGHTHOUSE POINT, FL 33064 US

New Mailing Address:

FEI Number: 25-1923951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUNEISEN, LINDA
555 BANYAN TREE LANE
VILLA 2
DELRAY BEACH, FL 33483 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: SPURLING, ALAN M
Address: GUSTAAF WAPPERS STRAAT 7
City-St-Zip: ANTWERP, BE 2150 BE

Title: MGRM () Delete
Name: SPURLING, ANNE-MARIE E
Address: UNIT 9, 989, GREAT WEST ROAD
City-St-Zip: BRENTFORD, MIDDX, UK TW8 9DN UK

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: ALAN M SPURLING

MGR

03/27/2006

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