

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000191

**FILED**  
**Apr 11, 2007**  
**Secretary of State**

**Entity Name:** POWER ALIGNMENT YOGA ENTERPRISES, LLC

**Current Principal Place of Business:**

3564 BAYSHORE CIRCLE  
TAVARES, FL 32778 US

**New Principal Place of Business:**

**Current Mailing Address:**

3564 BAYSHORE CIRCLE  
TAVARES, FL 32778 US

**New Mailing Address:**

FEI Number: 20-4121565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

MORALES HUTCHINGS, MYLINDA A MGRM  
3564 BAYSHORE CIRCLE  
TAVARES, FL 32778 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: MYLINDA ANN MORALES HUTCHINGS, MGRM

04/11/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MORALES HUTCHINGS, MYLINDA ANN  
Address: 3564 BAYSHORE CIRCLE  
City-St-Zip: TAVARES, FL 32778 US

**ADDITIONS/CHANGES:**

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: MYLINDA ANN MORALES HUTCHINGS

MGRM

04/11/2007

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