

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082221

FILED
Feb 05, 2009
Secretary of State

Entity Name: E5 PHARMA, LLC

Current Principal Place of Business:

3550 NW 126TH AVENUE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3550 NW 126TH AVENUE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 26-0875196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EDWARDS, ROBERT J JR
3550 NW 126TH AVENUE
CORAL SPRINGS, FL 33065 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: D () Delete
Name: EDWARDS, ROBERT J JR
Address: 7431 W CYPRESS HEAD DR
City-St-Zip: PARKLAND, FL 33067

Title: D () Delete
Name: KRAEMAR, MARK
Address: 2651 FOREST CIR
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: WESTON, STEVEN
Address: 6289 NW 62ND TER
City-St-Zip: PARKLAND, FL 33067

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: ROBERT J EDWARDS JR

CEO

02/05/2009

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