

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000117272

**FILED
Apr 14, 2011
Secretary of State**

Entity Name: THERAPEUTIC MOBILE SPA LLC

Current Principal Place of Business:

10805 SW 88 COURT
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

10805 SW 88 COURT
MIAMI, FL 33176

New Mailing Address:

FEI Number: 27-1449220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE GENESIS FIRM LLC
10660 NW 37TH TERR
DORAL, FL 33178 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
Name: ALBITE, CHARITY
Address: 10805 SW 88 COURT
City-St-Zip: MIAMI, FL 33176

I hereby 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: CHARITY ALBITE MGRM 04/14/2011

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