

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002964

Entity Name: LIFECONEX, LLC

FILED  
Apr 28, 2006  
Secretary of State

**Current Principal Place of Business:**

C/O DHL EXPRESS  
1200 S PINE ISLAND ROAD, 6TH FLOOR LEGAL  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DHL EXPRESS  
1200 S PINE ISLAND ROAD, 6TH FLOOR LEGAL  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 20-2368737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: AIR EXPRESS INTERNAT, IONAL USA INC.  
Address: C/O DHL EXPRESS 1200 S PINE ISLAND RD  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM ( ) Delete  
Name: LCAG USA INC.,  
Address: 1640 HEMPSTEAD TURNPIKE  
City-St-Zip: EAST MEADOW, NY 11554

**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: DONALD GARNER

P/A

04/28/2006

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