## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Feb 27, 2007 8:00 am Secretary of State

DOCUMENT # L0100003604  1. Entity Name IMIND RECOVERY, LLC						02-27-200	7 90080 026 °	****5(	Э.00
Principal Place of Business SUITE 306 9999 NE 2ND AVE. MIAMI SHORES, FL 33138		Mailing Address SUITE 306 9999 NE 2ND AVE. MIAMI SHORES, FL 33138				60019(			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02212007	Chg-LLC	CR2E083 (1	12/06)	
City & State		City & State			4. FEI Number 65-111			$\rightarrow$	plied For at Applicable
Zip 	Country	Zip	Country			of Status Desired	Fee f	00 Add Required	
_	6. Name and Address of Current	Registered Agent	Name	7			Registered Agent		
ANTARES CAPITAL CORPORATION				Street Address (P.O. Box Number is Not Acceptable)					
MIAMI LAKES; FL 33016			999	9 Ne	2ND A	AVENUL	SUITE	200	<u> </u>
Just W			City	9999 Ne 2ND AVENUE, SUITE 306 City MIAMI SHORES FL ZINGS			138		
8. The above the obligat	jamed every submits this statement fo idns on egistered agent.	r the purpose of changing its	•	-	•			ar with,	and accept
SIGNATURE .	Signature, yped or printed name of registered agent	Jonathay and title if applicable. (NOTE	n I Ki'sla :: Registered Agent sign	K, COL	Antare	s Capital C	CORP. 2/21	07	———
Di	iling Fee is \$50.00 ue by May 1, 2007						ike check payab da Department d		<b>.</b>
9.	we by May 1, 2007  MANAGING MEMBE	_	10.			Flori	da Department o	of State	
9. TITLE	MANAGING MEMBE	☐ Delete	TITLE			Flori	da Department o		■ Addition
9.	we by May 1, 2007  MANAGING MEMBE	☐ Delete		9999	- Ne 2	ADDITION	S/CHANGES	of State	
9. TITLE NAME	MANAGING MEMBE MGR ANTARES CAPITAL PARTNERS	☐ Delete	TITLE NAME	9999 MIA	9 NC 2 Ni SHO	ADDITION	S/CHANGES  SUITE 3	of State	
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE MGR ANTARES CAPITAL PARTNERS 7000 MIAMILLAKES DR W	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	9999 MIA	7 NC 2 Ni SHO	ADDITION	S/CHANGES  SUITE 3 330/6	of State	
9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE MGR ANTARES CAPITAL PARTNERS 7000 MIAMILLAKES DR W	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	9999 MIR	7 NC 2 Ni SHO	ADDITION	S/CHANGES  SUITE 3 330/6	Change	☐ Addition
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11. Thereby certify that the information supplied with this litting does not quality for the exemptions contained in Chapter 119. Florida Statutes. Further certify that the information indicated on this report is true and accurate and that my 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.

| Interest Certify that the information of the information indicated on this report is true and accurate and that my 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: UN W

Managing Menibea, Antares
TED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Capital Partners III, LLC

2/21/07

305 894 2888

Daytime Phone #