

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004731

FILED
Apr 09, 2010
Secretary of State

Entity Name: INTEGRATIVE ORIENTAL MEDICINE, LLC

Current Principal Place of Business:

5560A N. OCEAN BLVD
OCEAN RIDGE, FL 33435 US

New Principal Place of Business:

605 BELVEDERE RD.
SUITE 5
WEST PALM BEACH, FL 33405 US

Current Mailing Address:

5560A NORTH OCEAN BLVD.
OCEAN RIDGE, FL 33435

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEWIS, DANIEL R P
5560A NORTH OCEAN BLVD.
OCEAN RIDGE, FL 33435 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: P
Name: LEWIS, DANIEL R
Address: 5560A NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

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: DANIEL LEWIS

CEO

04/09/2010

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