## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009783

Address:

City-St-Zip:

Entity Name: BACK IN ACTION HEALTH, LLC

1520 10TH AVENUE NORTH, SUITE A

LAKE WORTH, FL 33460 US

FILED May 01, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1520 10TH AVENUE NORTH SUITE A LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** 1520 10TH AVENUE NORTH SUITE A LAKE WORTH, FL 33460 LIS FEI Number: 01-0678333 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANKLIN, ELLIOTT MCLAUGHLIN, ROBERT 2777 S. CONGRESS AVE 1520 10TH AVENUE NORTH LAKE WORTH, FL 33461 US SUITE A LAKE WORTH, FL 33460 US 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: ROBERT MCLAUGHLIN 05/01/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM ( ) Delete Title: () Change () Addition MCLAUGHLIN, ROBERT Name: Name: Address: 1520 10TH AVENUE NORTH, SUITE A Address: City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: NITTI, JOSEPH J JR. 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 MCLAUGHLIN MGRM 05/01/2007