

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000014905

**FILED**  
**Feb 09, 2010**  
**Secretary of State**

**Entity Name:** NERVIA ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

6920 NERVIA ST.  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

6920 NERVIA STREET  
CORAL GABLES, FL 33146

**Current Mailing Address:**

299 ALHAMBRA CIRCLE  
C/O PRIMECARE  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 20-1096296      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KRAMER, ROBERT M  
4000 HOLLYWOOD BLVD., STE. 485 SOUTH  
HOLLYWOOD, FL 33021 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:** MGR  
**Name:** HALEGUA, INO  
**Address:** 299 ALHAMBRA CIRCLE  
**City-St-Zip:** CORAL GABLES, FL 33134

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: INO HALEGUA

MGR

02/09/2010

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