2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 17, 2007
Secretary of State

DOCUMENT# L03000034627

Entity Name: BOCA RATON WELLNESS CENTER LLC

Current Principal Place of Business:

9980 CENTRAL PARK BLVD., SUITE 104
BOCA RATON, FL 33428

New Principal Place of Business:

9980 CENTRAL PARK BLVD., SUITE 118
BOCA RATON, FL 33428

Current Mailing Address:

9980 CENTRAL PARK BLVD., SUITE 104
BOCA RATON, FL 33428

New Mailing Address:

9980 CENTRAL PARK BLVD., SUITE 118
BOCA RATON, FL 33428

FEI Number: 01-0798966 **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:

LEVY, ROGER A
9980 CENTRAL PARK BLVD., SUITE 104
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

LEVY, ROGER A
9980 CENTRAL PARK BLVD., SUITE 118
BOCA RATON, FL 33428 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: ROGER LEVY 07/17/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: LEVY, ROGER
Address: 9980 CENTRAL PK BLVD STE 100
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition
Name: LEVY, ROGER
Address: 9980 CENTRAL PK BLVD SUITE 118
City-St-Zip: BOCA RATON, FL 33428

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: ROGER LEVY P 07/17/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date