

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021801

FILED
Jan 10, 2006
Secretary of State

Entity Name: INAARA MEDSPA OF ORLANDO LLC

Current Principal Place of Business:

4104 MILLENIA BLVD
SUITE 100
ORLANDO, FL 32839 US

New Principal Place of Business:

Current Mailing Address:

806 LAKE JACKSON CIRCLE
APOPKA, FL 32703 US

New Mailing Address:

4104 MILLENIA BLVD.
SUITE 100
ORLANDO, FL 32839 US

FEI Number: 84-1641075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
STE. E 773 4TH AVENUE NORTH
NAPLES, FL 34102 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: MGRM () Delete
Name: LEE, MARY B MS.
Address: 806 LAKE JACKSON CIRCLE
City-St-Zip: APOPKA, FL 32703 US

Title: MGRM (X) Delete
Name: SHUFFLER, R. E DR.
Address: 444 UNION GROVE ROAD
City-St-Zip: UNION GROVE, NC 28689 US

Title: MGRM (X) Delete
Name: SHUFFLER, CAROL B
Address: 444 UNION GROVE ROAD
City-St-Zip: UNION GROVE, NC 28689 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEE, MARY B MS.
Address: 6149 METROWEST BLVD., #106
City-St-Zip: ORLANDO, FL 32835 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY B. LEE

MS.

01/10/2006

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