2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2005
Secretary of State

DOCUMENT# L04000030961

Entity Name: THE CENTER FOR INTEGRATIVE HEALTH PLLC

Current Principal Place of Business:

9784 SW 24TH STREET
MIAMI, FL 33165 US

New Principal Place of Business:

2300 NE 2ND AVE
MIAMI, FL 33137 US

Current Mailing Address:

11985 SOUTHERN BLVD.
SUITE 293
ROYAL PALM BEACH, FL 33411 US

New Mailing Address:

2300 NE 2ND AVE
MIAMI, FL 33137 US

FEI Number: 20-1029692 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COSBY, JOHN L DO
11985 SOUTHERN BLVD
SUITE 293
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

COSBY, JOHN L DO
2300 NE 2ND AVE
MIAMI, FL 33137 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: JOHN L. COSBY 04/06/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition
Name: COSBY, JOHN L
Address: 2300 NE 2ND AVE
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN L. COSBY MGR 04/06/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date