2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2005
Secretary of State

DOCUMENT# L04000039732

Entity Name: PARADISE HEALING ARTS, LLC

Current Principal Place of Business:

727 HUMMINGBIRD WAY
#6
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

230 ARGYLE ROAD
#3
W. PALM BEACH, FL 33405 US

Current Mailing Address:

727 HUMMINGBIRD WAY
#6
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

230 ARGYLE ROAD
#3
W. PALM BEACH, FL 33405 US

FEI Number: 20-1170183 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, ELIZABETH M
3094 JOG ROAD
GREENACRES, FL 33467 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/MEMBERS:

Title: MGRM ( ) Delete
Name: BENTON, DARLENE
Address: 727 HUMMINGBIRD WAY #6
City-St-Zip: NORTH PALM BEACH, FL 33408 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BENTON, DARLENE
Address: 230 ARGYLE ROAD #3
City-St-Zip: WEST PALM BEACH, FL 33405 US

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: DARLENE E. BENTON MMMS 04/04/2005

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