

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060751

FILED  
Jan 10, 2007  
Secretary of State

**Entity Name:** NATURAL HEALTH RESOURCES INSTITUTE, A LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

GRAZYNA RICHTER-BEAMAN  
8374 MARKET STREET, #423  
BRADENTON, FL 34202

**New Principal Place of Business:**

**Current Mailing Address:**

GRAZYNA RICHTER-BEAMAN  
8374 MARKET STREET, #423  
BRADENTON, FL 34202

**New Mailing Address:**

FEI Number: 20-2032884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RICHTER-BEAMAN, GRAZYNA  
8374 MARKET STREET, #423  
BRADENTON, FL 34202 US

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

RICHTER-BEAMAN, GRAZYNA  
8374 MARKET STREET  
423  
BRADENTON, FL 34202 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: RICHTER-BEAMAN, GRAZYNA

01/10/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RICHTER-BEAMAN, GRAZYNA  
Address: 8374 MARKET STREET, #423  
City-St-Zip: BRADENTON, FL 34202

**ADDITIONS/CHANGES:**

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: RICHTER-BEAMAN, GRAZYNA

MGR

01/10/2007

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