

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063002

FILED
Sep 24, 2009
Secretary of State

Entity Name: TONABA HEALTHSCIENCE, LLC

Current Principal Place of Business:

565 JEFFERSON DRIVE
#115
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

565 JEFFERSON DRIVE
#115
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 84-1662050 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:

Name and Address of New Registered Agent:

FELDMAN, NATHAN L DR.
565 JEFFERSON DRIVE
#115
DEERFIELD BEACH, FL 33442 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FELDMAN, NATHAN L DR
Address: 565 JEFFERSON DRIVE, SUITE 115
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGRM () Delete
Name: ROBALLEY, THOMAS DR
Address: 19 GRISTMILL LANE
City-St-Zip: HUNTINGTON, CT 06484

Title: MGRM () Delete
Name: SCHWIBNER, BARRY H MD
Address: 3775 MYKONOS COURT
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ROBALLEY, THOMAS C DR
Address: 19 GRISTMILL LANE
City-St-Zip: HUNTINGTON, CT 06484

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

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: NATHAN FELDMAN

MGRM

09/24/2009

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