

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078465

Entity Name: B.C.R, LLC

FILED
Jan 17, 2006
Secretary of State

Current Principal Place of Business:

4567 N. PINE ISLAND ROAD
SUITE 2-A
SUNRISE, FL 33351 US

New Principal Place of Business:

5600 NW 102 AVENUE
SUITE 2
SUNRISE, FL 33351 US

Current Mailing Address:

4567 N. PINE ISLAND ROAD
SUITE 2-A
SUNRISE, FL 33351 US

New Mailing Address:

5600 NW 102 AVENUE
SUITE 2
SUNRISE, FL 33351 US

FEI Number: 20-1808899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYOS FINANCIAL GROUP, INC
2853 EXECUTIVE PARK DRIVE
SUITE 105
WESTON, FL 33331 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: MGR () Delete
Name: PARRA, JORGE
Address: 4315 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331 US

Title: MGRM () Delete
Name: ALVARADO, MARIA CONSUELO
Address: 4393 MAGNOLIA RIDGE DR.
City-St-Zip: WESTON, FL 33331 US

Title: MGRM () Delete
Name: MEJIA, BEATRIZ H
Address: 18610 SW 39TH STREET
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGRM () Delete
Name: PLATA, MARIA DEL ROSA
Address: 16412 SAPPHIRE BEND
City-St-Zip: WESTON, FL 33331 US

Title: MGRM (X) Delete
Name: VILLAMIZAR, RUTH
Address: 4069 CARAMBOLA CIRCLE NORTH
City-St-Zip: COCONUT CREEK, FL 33066

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PARRA, JORGE M
Address: 4315 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331 US

Title: MGRM (X) Change () Addition
Name: ALVARADO, MARIA C
Address: 4311 MAGNOLIA RIDGE DR.
City-St-Zip: WESTON, FL 33331 US

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

Title: MGRM (X) Change () Addition
Name: PLATA, MARIA DEL R
Address: 16412 SAPPHIRE BEND
City-St-Zip: WESTON, FL 33331 US

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: JORGE M. PARRA

MGR

01/17/2006

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