

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085204

FILED
Apr 20, 2012
Secretary of State

Entity Name: BACK IN HEALTH WELLNESS CENTER, LLC

Current Principal Place of Business:

18942 N. DALE MABRY HWY., SUITE 102
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

18942 N. DALE MABRY HWY., SUITE 102
LUTZ, FL 33548

New Mailing Address:

FEI Number: 64-0958091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, CINDY L D.C.
1636 CRAZY HORSE DR
LUTZ, FL 33548 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: MGRM
Name: PERKINS, CINDY L D.C.
Address: 1636 CRAZY HORSE DR
City-St-Zip: LUTZ, FL 33548

I hereby 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: CINDY PERKINS

MGRM

04/20/2012

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