

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011419

FILED
Mar 23, 2009
Secretary of State

Entity Name: THE HEALING CENTER LLC

Current Principal Place of Business:

1191 SW 16TH STREET
BOCA RATON, FL 33486 US

New Principal Place of Business:

701 SE 21ST AVE #408
DEERFIELD BEACH, FL 33441 US

Current Mailing Address:

1191 SW 16TH STREET
BOCA RATON, FL 33486 US

New Mailing Address:

701 SE 21ST AVE #408
DEERFIELD BEACH, FL 33441 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ABRAMI, DEIRDRE B
5301 N FEDERAL HWY
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

ABRAMI, DEIRDRE B
701 SE 21ST AVE #408
DEERFIELD BEACH, FL 33441 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: DEIRDRE ABRAMI

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ABRAMI, DEIRDRE B
Address: 5301 N FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ABRAMI, DEIRDRE B
Address: 701 SE 21ST AVE #408
City-St-Zip: DEERFIELD BEACH, FL 33441

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: DEIRDRE ABRAMI

MGR

03/23/2009

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