

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000041616

FILED
Feb 17, 2010
Secretary of State

Entity Name: THE WOMEN'S WELLNESS CENTER OF SOUTH FLORIDA LLC

Current Principal Place of Business:

5901 COLONIAL DRIVE
SUITE 303
MARGATE, FL 33063

New Principal Place of Business:

5901 COLONIAL DRIVE
SUITE 302
MARGATE, FL 33063

Current Mailing Address:

13900 S JOG ROAD
203-276
DELRAY BEACH, FL 33446

New Mailing Address:

5401 N UNIVERSITY DR
SUITE 204
CORAL SPRINGS, FL 33067

FEI Number: 51-0545717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZ, ALLEN H
13900 S JOG ROAD
203-376
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

DUBROW, ALAN CPA
5401 N UNIVERSITY DRIVE
SUITE 204
CORAL SPRINGS, FL 33067 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: ALAN DUBROW, CPA

02/17/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SOLOMON, TARA A DR.
Address: 5901 COLONIAL DR STE 302
City-St-Zip: MARGATE, FL 33063

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: TARA A SOLOMON, M.D.

DR.

02/17/2010

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