2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045812

Entity Name: YOGA ORGANICS.LLC

FILED Jun 12, 2006 Secretary of State

New Principal Place of Business: Current Principal Place of Business:

3045 NORTH FERDERAL HIGHWAY CORAL SHOPPING PLAZA UNIT 96 AND 98 FT LAUDERDALE, FL 33306

Current Mailing Address: New Mailing Address:

3045 NORTH FERDERAL HIGHWAY 900 N.E 16 TH TERRACE

CORAL SHOPPING PLAZA UNIT 96 AND 98 APT 5 FT LAUDERDALE, FL 33306

FT LAUDERDALE, FL 33304

FEI Number: 84-1681392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

CHARLES-MARCHESE, KELLY ANN CHARLES-MARCHESE, KELLY ANN

2601 N.E. 11TH CT. 900 N.E 16TH TERRACE

FT. LAUDERDALE, FL 33304 US FT. LAUDERDALE, FL 33304 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: 06/12/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition

CHARLES MARCHESE, KELLY ANN CHARLES MARCHESE, KELLY ANN Name: Name: Address: 2601 NE 11CT Address: 900 N.E 16 TERRACE APT 5 City-St-Zip: FT LAUDERDALE, FL 33304 US City-St-Zip: FT LAUDERDALE, FL 33304 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: KELLY ANN CHARLES MARCHESE **MGRM** 06/12/2006