


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000119905 1. Entity Name HEALTH GEMS LLC	
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FILED
Aug 20, 2008 08:00 AM
Secretary of State

Principal Place of Business 218A E. EAU GALLIE BLVD #170 INDIAN HARBOR BEACH, FL 32937	Mailing Address 218A E. EAU GALLIE BLVD #170 INDIAN HARBOR BEACH, FL 32937
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08052008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3252748	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BAKER, MARK 218A E. EAU GALLIE BLVD #170 INDIAN HARBOR BEACH, FL 32937

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHRYSTAL, NONNIE 218A E. EAU GALLIE BLVD #170 INDIAN HARBOR BEACH, FL 32937
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08/20/08-80001-016 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Mark Baker