

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000012375

Entity Name: NUTRITION CONSULTANTS, LLC

FILED  
Apr 12, 2007  
Secretary of State

## Current Principal Place of Business:

2701 W BUSCH BLVD  
105  
TAMPA, FL 33618

## New Principal Place of Business:

13803 MILL COVE CIR  
TAMPA, FL 33618

## Current Mailing Address:

2701 W BUSCH BLVD  
105  
TAMPA, FL 33618

## New Mailing Address:

13803 MILL COVE CIR  
TAMPA, FL 33618

FEI Number: 20-4221841

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAU, GRACE  
2701 W BUSCH BLVD  
105  
TAMPA, FL 33618 US

## Name and Address of New Registered Agent:

LAU, GRACE  
13803 MILL COVE CIR  
TAMPA, FL 33618 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: GRACE LAU

04/12/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LAU, GRACE  
Address: 2701 W BUSCH BLVD, STE 105  
City-St-Zip: TAMPA, FL 33618

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LAU, GRACE  
Address: 13803 MILL COVE CIR  
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the 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: GRACE LAU

MGRM

04/12/2007

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