

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036954

Entity Name: ELITE LASER CARE, LLC

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

2247 PALM BEACH LAKES BLVD
#209
WEST PALM BCH, FL 33409

New Principal Place of Business:

Current Mailing Address:

13833 WELLINGTON TRACE, E-4, PMB 217
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 20-4679360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TED O WINTER, CPA
2560 RCA BLVD
PALM BEACH GRDNS, FL 33410 US

Name and Address of New Registered Agent:

WHELIHAN, REGINA
9106 DUCALE WAY
207
PALM BEACH GRDNS, FL 33418 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: REGINA WHELIHAN

04/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHELIHAN, REGINA
Address: 13833 WELLINGTON TRACE E4 PMB 217
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: WHELIHAN, MAUREEN MD
Address: 13833 WELLINGTON TRACE, E-4, PMB 217
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: REGINA WHELIHAN

MGRM

04/23/2008

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