

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046545

FILED
May 01, 2012
Secretary of State

Entity Name: AGAPE HEALTH GROUP, LLC

Current Principal Place of Business:

161 HAMPTON POINT DR
ST AUGUSTINE, FL 32092

New Principal Place of Business:

Current Mailing Address:

PO BOX 19427
JACKSONVILLE, FL 32245

New Mailing Address:

FEI Number: 20-4922173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOILANEN, THOMAS
1309 ST JOHNS BLUFF RD N
104
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

ABREA, LETICIA R MD
161 HAMPTON POINT DR
ST AUGUSTINE, FL 32092 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: LETICIA R ABREA MD

05/01/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DIZON, ALEJANDRO
Address: 6079 WAKULA SPRINGS DR
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM
Name: ABREA, LETICIA
Address: 7819 MOUNT RAINIER DR
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM
Name: DIZON, LIBERTY
Address: 6079 WAKULA SPRINGS DR
City-St-Zip: JACKSONVILLE, FL 32258

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: LETICIA R ABREA MD

MGRM

05/01/2012

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