

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060870

Entity Name: HEALTH CLUB EXPERTS.COM,LLC

FILED
Mar 07, 2007
Secretary of State

Current Principal Place of Business:

1461 SOUTH OCEAN BLVD.
#325
POMPANO BEACH, FL 33062 US

Current Mailing Address:

1461 SOUTH OCEAN BLVD.
#325
POMPANO BEACH, FL 33062 US

FEI Number: 20-5062642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSLEY, PAUL
1461 SOUTH OCEAN BLVD
#325
POMPANO BEACH, FL 33062 US

New Principal Place of Business:

1461 SOUTH OCEAN BLVD.
#314
POMPANO BEACH, FL 33062 US

New Mailing Address:

1461 SOUTH OCEAN BLVD.
#314
POMPANO BEACH, FL 33062 US

Name and Address of New Registered Agent:

BOSLEY, PAUL
1461 SOUTH OCEAN BLVD
#314
POMPANO BEACH, FL 33062 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:

03/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: BOSLEY, PAUL E
Address: 1461 SOUTH OCEAN BLVD UNIT 314
City-St-Zip: POMPANO BEACH, FL 33062 US

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: PAUL BOSLEY

MR

03/07/2007

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