2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2007
Secretary of State

DOCUMENT# L06000071100

Entity Name: BREATHE PILATES AND MOVEMENT, LLC

Current Principal Place of Business:

4504 BEAUMARIS DRIVE
LAND O' LAKES, FL 34638

New Principal Place of Business:

Current Mailing Address:

4504 BEAUMARIS DRIVE
LAND O' LAKES, FL 34638

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GRAY, NICCOLE Z
4504 BEAUMARIS DRIVE
LAND O' LAKES, FL 34638 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GRAY, NICCOLE Z
Address: 4504 BEAUMARIS DRIVE
City-St-Zip: LAND O' LAKES, FL 34638

Title: MGRM (X) Delete
Name: GRAY, BRADLEY D
Address: 4504 BEAUMARIS DRIVE
City-St-Zip: LAND O' LAKES, FL 34638

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 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: NICCOLE Z. GRAY MGRM 03/06/2007

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