

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000007680

FILED
Oct 02, 2008
Secretary of State**Entity Name:** LIFE LABS INTERNATIONAL, LLC**Current Principal Place of Business:**1080 NW 163RD DRIVE
MIAMI, FL 33169**New Principal Place of Business:**1001 NW 163RD DRIVE
SUITE 2
MIAMI, FL 33169**Current Mailing Address:**1080 NW 163RD DRIVE
MIAMI, FL 33169**New Mailing Address:**1001 NW 163RD DRIVE
SUITE 2
MIAMI, FL 33169**FEI Number:** 01-0881827**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LERMSIDER, ANDREW
1348 WASHINGTON AVENUE
#138
MIAMI BEACH, FL 33139 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: TRICON HOLDINGS, LLC,
Address: 201 ALHAMBRA CIRCLE # 501
City-St-Zip: CORAL GABLES, FL 33134**Title:** MGR () Delete
Name: FRESCO CONSULTING LT, D.
Address: 1348 WASHINGTON AVE. #138
City-St-Zip: MIAMI BEACH, FL 33139**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: ANDREW LERMSIDER

RA

10/02/2008

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