

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000028688

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** HEALTHY EATS, LLC

**Current Principal Place of Business:**

535 SE 18 LANE  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

535 SE 18 LANE  
HOMESTEAD, FL 33030

**New Mailing Address:**

**FEI Number:** 77-0682376

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOSNER, STEVEN D  
65 NW 16TH STREET  
HOMESTEAD, FL 33030 US

**Name and Address of New Registered Agent:**

ALVEARI, CHRISSIE D  
535 SE 18 LANE  
HOMESTEAD, FL 33030 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: CHRISSIE ALVEARI

02/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ALVEARI, CHRISTINE D  
Address: 535 SE 18 LANE  
City-St-Zip: HOMESTEAD, FL 33030

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: CHRISSIE ALVEARI

OWNE

02/10/2012

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