

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033990

FILED  
Sep 02, 2008  
Secretary of State

**Entity Name:** STUDIO PILATES AND PHYSICAL THERAPY LLC

**Current Principal Place of Business:**

12110 SW 114 PL  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

9100 TIFFANY DR  
MIAMI, FL 33157 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LOHEIDE, WILLIAM M  
9100 TIFFANY DR  
MIAMI, FL 33157 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: LOHEIDE, WILLIAM M  
Address: 9100 TIFFANY DR  
City-St-Zip: MIAMI, FL 33157 US

**ADDITIONS/CHANGES:**

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: WILLIAM LOHEIDE

MGR

09/02/2008

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