

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038248

FILED
May 28, 2008
Secretary of State

Entity Name: EXPRESSIVE TOUCH THERAPY, L.L.C.

Current Principal Place of Business:

3843 PEMBROKE ROAD
HOLLYWOOD, FL 33024

New Principal Place of Business:

811 E LAS OLAS
FORT. LAUDERDALE, FL 33301

Current Mailing Address:

940 N 66TH TERRACE
8
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 20-8811553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

SORSHER, ALEX
2500-1 N STATE ROAD 7
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

CORNE, MARY
940 N. 66 TERRACE
8
HOLLYWOOD, FL 33024 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: MARY CORNE

05/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CORNE, MARY
Address: 940 N 66TH TERRACE STE 8
City-St-Zip: HOLLYWOOD, FL 33024

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: MARY CORNE

AGNT

05/28/2008

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