2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2008
Secretary of State

DOCUMENT# L07000051595

Entity Name: NATURAL WELLNESS LABS, LLC

Current Principal Place of Business:

3406 S.W. 9TH AVENUE
FORT LAUDERDALE, FL 33315

New Principal Place of Business:

886 TULIP CIRCLE
WESTON, FL 33327

Current Mailing Address:

3406 S.W. 9TH AVENUE
FORT LAUDERDALE, FL 33315

New Mailing Address:

886 TULIP CIRCLE
WESTON, FL 33327

FEI Number: 26-0517138 **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:

MARGOLIS, JOHN A
9990 S.W. 77TH AVENUE, SUITE 330
MIAMI, FL 331562661 US

Name and Address of New Registered Agent:

RIOS, DEBORAH
9000 SHERIDAN
138
PEMBROKE PINES, 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: RIOS, DEBORAH 05/07/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ALVAREZ, RICARDO
Address: 2950 WEST 84TH STREET
City-St-Zip: HIALEAH, FL 33018

Title: MGRM ( ) Delete
Name: SOLARTE, FELIPE
Address: 2950 WEST 84TH STREET
City-St-Zip: HIALEAH, FL 33018

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: SOLARTE, FELIPE MGRM 05/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date