

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060169

FILED
Apr 18, 2008
Secretary of State

Entity Name: JOY HEALTH & WELLNESS, LLC

Current Principal Place of Business:

2335 9TH STREET NORTH
SUITE 205
NAPLES, FL 34102 US

New Principal Place of Business:

2335 TAMiami TRAIL NORTH
SUITE 206
NAPLES, FL 34103 US

Current Mailing Address:

P.O. BOX 11717
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 33-1167863 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YING, JOEL O MD
1305 S. 27 AVE.
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

YING, JOEL O MD
4961 CORAL WOOD DR.
NAPLES, FL 34119 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: _____

04/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: YING, JOEL O MD
Address: 1305 S. 27 AVE.
City-St-Zip: HOLLYWOOD, FL 33020 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: YING, JOEL O MD
Address: CORAL WOOD DR.
City-St-Zip: NAPLES, FL 34119 US

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: JOEL YING

MGR

04/18/2008

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