2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# L07000096357

Entity Name: MASSAGE CIRCUIT, LLC

Current Principal Place of Business:

22730 BELLA RITA CIRCLE
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

22730 BELLA RITA CIRCLE
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 26-1102937 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARONE, JOSEPH J
22730 BELLA RITA CIRCLE
BOCA RATON, FL 33433 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: BARONE, JOSEPH J
Address: 22730 BELLA RITA CIRCLE
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM ( ) Delete
Name: AQUILINO, VINCENT A
Address: 9175 NW 43RD COURT
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM ( ) Delete
Name: BARONE, ENZO J
Address: 22730 BELLA RITA CIRCLE
City-St-Zip: BOCA RATON, FL 33433 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: WORTHINGTON, GRANT
Address: 8352 D TRENT CT.
City-St-Zip: BOCA RATON, FL 33433 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: JOSEPH J. BARONE PRES 03/18/2009

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