

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109906

FILED
Jan 12, 2009
Secretary of State

Entity Name: CONSCIOUS BUSINESS LLC

Current Principal Place of Business:

104 CRANDON BLVD., SUITE 300A
KEY BISCAYNE, FL 33149

New Principal Place of Business:

104 CRANDON BLVD
SUITE 300A
KEY BISCAYNE, FL 33149

Current Mailing Address:

104 CRANDON BLVD., SUITE 300A
KEY BISCAYNE, FL 33149

New Mailing Address:

104 CRANDON BLVD
SUITE 300A
KEY BISCAYNE, FL 33149

FEI Number: 55-3879255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOFMAN, ALFREDO M
104 CRANDON BLVD., SUITE 300A
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

KOFMAN, ALFREDO M
104 CRANDON BLVD.
SUITE 300A
KEY BISCAYNE, FL 33149 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:

01/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VIGHENZONI, CARLOS
Address: 104 CRANDON BLVD., SUITE 300A
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM () Delete
Name: KOFMAN, ALFREDO M
Address: 104 CRANDON BLVD., SUITE 300A
City-St-Zip: KEY BISCAYNE, FL 33149

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: CARLOS VIGHENZONI

MGRM

01/12/2009

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