2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000113513

Entity Name: CURAME CLINICS LLC

FILED May 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13387 GLACIER NATIONAL DRIVE #302 249 MAITLAND AVENUE

ORLANDO, FL 32837 ALTAMONTE SPRINGS, FL 32701

Current Mailing Address: New Mailing Address:

13387 GLACIER NATIONAL DRIVE #302 249 MAITLAND AVENUE

ORLANDO, FL 32837 ALTAMONTE SPRINGS, FL 32701

FEI Number: 71-1041304 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: Name and Address of New Registered Agent:

WESTER, FRANS WESTER, FRANS

13387 GLACIER NATIONAL DRIVE #302 249 MAITLAND AVENUE

ALTAMONTE SPRINGS, FL 32701 ORLANDO, FL 32837 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: FRANS WESTER 05/07/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition

E3 USA, INC. E3 USA, INC., Name: Name: Address: 13387 GLACIER NATIONAL DRIVE #302 Address: 249 MAITLAND AVENUE

City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: E3 USA, INC. 05/07/2008