

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000113855

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** ADVANCED SKIN AND WEIGHT LOSS CLINIC LLC

**Current Principal Place of Business:**

111 WEST ROBERTSON STREET  
BRANDON, FL 33511 US

**New Principal Place of Business:**

**Current Mailing Address:**

107 WEST ROBERTSON STREET  
BRANDON, FL 33511 US

**New Mailing Address:**

5711 HAWKLAKE RD  
LITHIA, FL 33547 US

FEI Number: 26-1391654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAHMAN, KHAWAJA A  
107 WEST ROBERTSON ST  
BRANDON, FL 33511 US

**Name and Address of New Registered Agent:**

RAHMAN, KHAWAJA A  
5711 HAWKLAKE RD  
LITHIA, FL 33547 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: KHAWAJA RAHMAN

03/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RAHMAN, KHAWAJA A  
Address: 5711 HAWKLAKE RD  
City-St-Zip: LITHIA, FL 33547 US

Title: MGR  
Name: RAHMAN, SAMIA  
Address: 5711 HAWKLAKE RD  
City-St-Zip: LITHIA, FL 33547 US

I hereby 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: KHAWAJA RAHMAN

MGR

03/22/2012

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