

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000000911

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** A HEALING ENERGY MASSAGE, LLC

**Current Principal Place of Business:**

8850 TERRENE COURT, SUITE 103  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

8850 TERRENE COURT,  
SUITE 103  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 36-4623525

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LLERENA, JANET A  
17030 GOLFSIDE CIRCLE  
#602  
FORT MYERS, FL 33908 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  
**Name:** LLERENA, JANET A  
**Address:** 17030 GOLFSIDE CIRCLE, #602  
**City-St-Zip:** FORT MYERS, FL 33908

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: JANET A. LLERENA

MGRM

01/10/2012

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