

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035621

Entity Name: HEALTHWORX, LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

3702 WASHINGTON STREET
SUITE 305
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

200 S. BISCAYNE BLVD.
SUITE 3900
MIAMI, FL 33131

New Mailing Address:

3702 WASHINGTON STREET
SUITE 305
HOLLYWOOD, FL 33021

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUERBACH, MARC H
200 S. BISCAYNE BLVD.
SUITE 3900
MIAMI, FL 33131 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: POLNER, BRIAN
Address: 2678 RIVIERA COURT
City-St-Zip: WESTON, FL 33332

Title: MGRM () Change (X) Addition
Name: SPILLER, DENNIS
Address: 1883 NW 124 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGRM () Change (X) Addition
Name: IBRAHIM, BASSEL
Address: 2591 SW 102ND AVENUE
City-St-Zip: DAVIE, FL 33324

Title: MGRM () Change (X) Addition
Name: LINZER, DOV
Address: 4450 MANGRUM COURT
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM () Change (X) Addition
Name: COHEN, YALE
Address: 1439 VICTORIA ISLE DRIVE
City-St-Zip: WESTON, FL 33327

Title: MGRM () Change (X) Addition
Name: TALLEY, JULIO
Address: 2305 WILLOW LANE
City-St-Zip: FORT LAUDERDALE, FL 33331

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: BRIAN POLNER

MGRM

04/16/2009

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