

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000037929

FILED
Apr 05, 2011
Secretary of State

Entity Name: EASTERN MEDICINE HEALTH CENTER LLC

Current Principal Place of Business:

280 PATTERSON RD, STE 1
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

280 PATTERSON RD, STE 1
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 26-2375447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WANG, LAN
46 JUNIPER DR.
DAVENPORT, FL 33837 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: DENG, FENG
Address: 46 JUNIPER DR.
City-St-Zip: DAVENPORT, FL 33837

Title: MGR
Name: WANG, LAN
Address: 280 PATTERSON RD, STE 1
City-St-Zip: HAINES, FL 33844

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: LAN WANG

MG

04/05/2011

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