2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2010
Secretary of State

DOCUMENT# L08000046548

Entity Name: SUNSHINE MEDICAL TOURISM, LLC

Current Principal Place of Business:

18950 US HWY 441
STE 205
MT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

18950 US HWY 441
STE 205
MT DORA, FL 32757

New Mailing Address:

FEI Number: 26-3804632 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

JOCHIM, VANCE
18950 US HWY 441
STE. 205
MOUNT DORA, FL 32757 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: JOCHIM, VANCE
Address: 18950 US HWY 441 - STE 205
City-St-Zip: MT DORA, FL 32757

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 Statues.

SIGNATURE: VANCE L. JOCHIM MGRM 05/04/2010

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