2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 24, 2009
Secretary of State

DOCUMENT# L08000049751

Entity Name: IBALANCE, LLC

Current Principal Place of Business:

1070 E. INDIANTOWN RD.
#206
JUPITER, FL 33477

New Principal Place of Business:

26 MARLWOOD LANE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

26 MARLWOOD LANE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 26-2633991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

REYNOLDS, WILLIAM C
26 MARLWOOD LANE
PALM BEACH GARDENS, FL 33418 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: MGR ( ) Delete
Name: REYNOLDS, WILLIAM C
Address: 26 MARLWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: REYNOLDS, WILLIAM C
Address: 26 MARLWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM ( ) Change (X) Addition
Name: GELAZELA, MARK A
Address: 3677 JASMINE AVE #10
City-St-Zip: LOS ANGELES, CA 90034

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: WILLIAM C. REYNOLDS MGRM 05/24/2009

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