

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 15, 2010
Secretary of State

Entity Name: FLORIDA INTEGRATED WELLNESS INSTITUTE LLC

Current Principal Place of Business:

34041 US HWY 19 N
STE A
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

34041 US HWY 19 N
STE A
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 26-2749530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAUNK, JAWAHAR L
34041 US HWY 19 N
STE A
PALM HARBOR, FL 34684 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: TAUNK, JAWAHAR L
Address: 34041 US HWY 19 N - STE A
City-St-Zip: PALM HARBOR, FL 34684

Title: MGRM
Name: TAUNK, VIJAY
Address: 34041 US HWY 19 N - STE A
City-St-Zip: PALM HARBOR, FL 34684

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: JAWAHAR TAUNK

MGRM

01/15/2010

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