

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000074275

FILED
Apr 14, 2009
Secretary of State

Entity Name: AGAPI HEALTH & NUTRITION CLUB

Current Principal Place of Business:

10665 SW 190 ST
UNIT 3201
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

10665 SW 190 ST
UNIT 3201
MIAMI, FL 33157

New Mailing Address:

FEI Number: 80-0230987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERA, SYLVIA M
1926 NE 3RD COURT
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

PERA, SYLVIA M
2498 NE 4 STREET
HOMESTEAD, FL 33033 US

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: SYLVIA M. PERA

04/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PERA, ROLANDO D
Address: 1926 NE 3RD COURT
City-St-Zip: HOMESTEAD, FL 33030

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PERA, ROLANDO D
Address: 2498 NE 4TH STREET
City-St-Zip: HOMESTEAD, FL 33033

Title: MGR () Change (X) Addition
Name: PERA, SYLVIA M
Address: 2498 NE 4TH STREET
City-St-Zip: HOMESTEAD, FL 33033

Title: MGR () Change (X) Addition
Name: GARCIA, NOEL A
Address: 10665 SW 190 ST, UNIT 3201
City-St-Zip: MIAMI, FL 33157

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: SYLVIA M. PERA

MGR

04/14/2009

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