

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000077996

Entity Name: NATURAL MEDICARE, LLC

FILED
Apr 27, 2010
Secretary of State

Current Principal Place of Business:

15165 SW 44TH ST.
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 630385
MIAMI, FL 33163

New Mailing Address:

FEI Number: 26-3184393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALCEDO, CONSUELO
15445 SW 96TH TERRACE
MIAMI, FL 33196 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
Name: ESTRADA TUANAMA, CESAR HUGO
Address: 3045 NW 97TH ST.
City-St-Zip: MIAMI, FL 33147

Title: MGR
Name: VILLAGOMEZ ESCOBEDO, MARIA DE JESUS
Address: 3045 NW 97TH ST.
City-St-Zip: MIAMI, FL 33147

Title: T
Name: PORTILLO ESCOBEDO, ANGELA MABEL
Address: 3045 NW 97TH ST.
City-St-Zip: MIAMI, FL 33147

Title: S
Name: PORTILLO ESCOBEDO, JOHANNA PAOLA
Address: 3045 NW 97TH ST.
City-St-Zip: MIAMI, FL 33147

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: ESTRADA TUANAMA, CESAR HUGO

MGR

04/27/2010

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