

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084519

FILED
Feb 05, 2010
Secretary of State

Entity Name: IDEAL FAMILY HEALTH, LLC

Current Principal Place of Business:

11850 9 STREET NORTH - # 18102
ST PETERSBURG, FL 33716

New Principal Place of Business:

Current Mailing Address:

11850 9 STREET NORTH - # 18102
ST PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 23-3326601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HERNANDEZ, OTNIEL
11850 9 STREET NORTH - # 18102
ST PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

HERNANDEZ, DR. OTNIEL
11850 9 STREET NORTH - # 18102
ST PETERSBURG, FL 33716 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: DR. OTNIEL HERNANDEZ

02/05/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: CEO
Name: HERNANDEZ, DR. OTNIEL
Address: 11850 9 STREET NORTH - # 18102
City-St-Zip: ST PETERSBURG, FL 33716

Title: MGR
Name: DE LA RUA, DR. MAIRIM
Address: 11850 9 STREET NORTH - # 18102
City-St-Zip: ST PETERSBURG, FL 33716

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: DR. OTNIEL HERNANDEZ

CEO

02/05/2010

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