2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2012
Secretary of State

DOCUMENT# L08000084519

Entity Name: IDEAL FAMILY HEALTH, LLC

Current Principal Place of Business:

4410 W 16 AVE #56
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4410 W 16 AVE #56
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 26-3326601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HERNANDEZ, DR. OTNIEL
4410 W 16 AVE #56
HIALEAH, FL 33012 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: CEO
Name: HERNANDEZ, DR. OTNIEL
Address: 4410 W 16 AVE # 56
City-St-Zip: HIALEAH, FL 33012

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 Statues.

SIGNATURE: OTNIEL HERNANDEZ CEO 04/11/2012

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