

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000099080

**FILED**  
**May 12, 2010**  
**Secretary of State**

**Entity Name:** INTEGRATED WELLNEZ LLC

**Current Principal Place of Business:**

90 S.W. 3RD ST., STE 3412  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

90 S.W. 3RD ST., STE 3412  
MIAMI, FL 33130

**New Mailing Address:**

**FEI Number:** 26-3582342      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

TIRADO, CATALINA MS.  
2451 BRICKELL AVE  
3E  
MIAMI, FL 33129 US

**Name and Address of New Registered Agent:**

TIRADO, CATALINA MS.  
90 SW 3RD ST  
3412  
MIAMI, FL 33130 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: CATALINA TIRADO

05/12/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** TIRADO, CATALINA MS.  
**Address:** 90 SW 3RD ST # 3412  
**City-St-Zip:** MIAMI, FL 33130

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: CATALINA TIRADO

PSD

05/12/2010

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