

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000000460

Entity Name: THERA-PRO CARE, LLC.

FILED  
Jan 23, 2010  
Secretary of State

**Current Principal Place of Business:**

1830 N.W. 7TH ST., STE 202  
MIAMI, FL 33125 US

**New Principal Place of Business:**

**Current Mailing Address:**

1830 N.W. 7TH ST., STE 202  
MIAMI, FL 33125 US

**New Mailing Address:**

FEI Number: 26-3958221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAREDES, DINAIBYS  
16341 SW 139 CT  
MIAMI, FL 33177 US

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

PAREDES, DINAIBYS  
1830 NW 7 STREET, SUITE 202  
MIAMI, FL 33125 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: DINAIBYS PAREDES

01/23/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PAREDES, DINAIBYS  
Address: 1830 NW 7 STREET, SUITE 202  
City-St-Zip: MIAMI, FL 33125 US

Title: MGR  
Name: SANCHEZ, BELISARIO  
Address: 1830 NW 7 STREET, SUITE 202  
City-St-Zip: MIAMI, FL 33125

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: DINAIBYS PAREDES

MGR

01/23/2010

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