

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000024145

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** PHX PHARMACEUTICAL RESEARCH & DEVELOPMENT , LLC

**Current Principal Place of Business:**

13531 SW 101 LANE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 566240  
PINECREST, FL 33256

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WESTON, EMILY G  
7610 SW 79 COURT  
MIAMI, FL 33143 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: MGRM  
Name: GREEN, LAWRENCE M  
Address: P.O. BOX 566240  
City-St-Zip: PINECREST, FL 33256

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: LAWRENCE M. GREEN

MGRM

01/04/2012

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