

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000052858

**FILED**  
**May 13, 2010**  
**Secretary of State**

**Entity Name:** MYBLOOD INTERNATIONAL LLC

**Current Principal Place of Business:**

14767 94TH PATH  
LIVE OAK, FL 32060

**New Principal Place of Business:**

**Current Mailing Address:**

14767 94TH PATH  
LIVE OAK, FL 32060

**New Mailing Address:**

PO BOX 202  
LIVE OAK, FL 32064

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

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH, SUITE 101-330  
NAPLES, FL 34102    US

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

SPICER, PAUL MR  
11915 116TH TER LIVE OAK, FL 32060-6709  
LIVE OAK, FL 32060    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: PAUL SPICER

05/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CARROLL, DAVID  
Address: 14767 94TH PATH  
City-St-Zip: LIVE OAK, FL 32060

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: DAVID KEMP CARROLL

MR.

05/13/2010

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