2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2010
Secretary of State

DOCUMENT# L09000089032

Entity Name: TREE OF LIFE WELLNESS CENTER, LLC

Current Principal Place of Business:

2441 NW 93 AVE
SUITE #102A
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

2441 NW 93 AVE
SUITE #102A
DORAL, FL 33172

New Mailing Address:

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

Name and Address of Current Registered Agent:

QUINTANA, WILFREDO
2441 NW 93 AVE
SUITE #102A
DORAL, FL 33172 US

Name and Address of New Registered Agent:

SMITH, PABLO
2441 NW 93 AVE
SUITE #102A
DORAL, FL 33172 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: PABLO SMITH 04/12/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SMITH, PABLO
Address: 2441 NW 93 AVE, SUITE #102A
City-St-Zip: DORAL, FL 33172

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: PABLO SMITH MGRM 04/12/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date