

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000105724

FILED
Apr 30, 2010
Secretary of State

Entity Name: BODY SYMPHONY RX, LLC

Current Principal Place of Business:

6834 28TH ST. CIRCLE EAST
UNIT A
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

6834 28TH ST. CIRCLE EAST
UNIT A
SARASOTA, FL 34243

New Mailing Address:

FEI Number: 27-1731119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRIEDMAN, AHARON
6834 28TH ST. CIRCLE EAST
UNIT A
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

CHOPKI, AUDREY
3049 ALTA VISTA ST.
SARASOTA, FL 34237 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: AUDREY CHOPKI

04/30/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: DR. BACH MACCLOUD, DO, ND, PHD, LC
Address: 3049 ALTA VISTA ST.
City-St-Zip: SARASOTA, FL 34237

Title: MGR
Name: HEALTHY CHOCOLATE FLORIDA, LLC
Address: 6834 28TH ST. CIRCLE EAST
City-St-Zip: SARASOTA, FL 34243

Title: MGR
Name: CHOPKI, AUDREY
Address: 3049 ALTA VISTA ST.
City-St-Zip: SARASOTA, FL 34237

Title: MGR
Name: MCCOMB, JESSICA
Address: 3409 BRANCH CREEK DR.
City-St-Zip: SARASOTA, FL 34235

Title: MGR
Name: ROBINS, JUNE
Address: 3120 ARCH DR.
City-St-Zip: SARASOTA, FL 34232

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: AUDREY CHOPKI

MGR

04/30/2010

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