

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000111639

FILED
Apr 26, 2010
Secretary of State

Entity Name: PROFESSIONAL HEALING SERVICES LLC

Current Principal Place of Business:

5130 S. FLORIDA AVE, STE 410
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

5130 S. FLORIDA AVE, STE 410
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 27-1341489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LI, ROBERTO SR
5130 S. FLORIDA AVE, STE 410
LAKELAND, FL 33813 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: LI, ROBERTO SR.
Address: 5130 S. FLORIDA AVE, STE 410
City-St-Zip: LAKELAND, FL 33813

Title: MGR
Name: REYES, URBANO
Address: 5130 S. FLORIDA AVE, STE 410
City-St-Zip: LAKELAND, FL 33813

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: URBANO REYES

MGR

04/26/2010

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