

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000003458

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** OGGY HERBAL LABS LLC

**Current Principal Place of Business:**

6625 MIAMI LAKES DRIVE, SUITE 325  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

6625 MIAMI LAKES DRIVE, SUITE 325  
MIAMI LAKES, FL 33014

**New Mailing Address:**

**FEI Number:** 27-1648955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOMES, EDUARDO GOMEZ  
6625 MIAMI LAKES DRIVE, SUITE 325  
MIAMI LAKES, FL 33014 US

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

GOMEZ GOMES, EDUARDO  
6625 MIAMI LAKES DRIVE, SUITE 325  
MIAMI LAKES, FL 33014 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: EDUARDO GOMEZ GOMES

04/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GOMEZ GOMES, EDUARDO  
Address: 6625 MIAMI LAKES DRIVE, SUITE 325  
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM  
Name: GOMEZ PEREZ, JOSE EDUARDO  
Address: 6625 MIAMI LAKES DRIVE, SUITE 325  
City-St-Zip: MIAMI LAKES, FL 33014

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: EDUARDO GOMEZ GOMES

MGRM

04/28/2011

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