

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000113706

FILED
Apr 28, 2011
Secretary of State

Entity Name: PAULINE'S HEALTH CARE, LLC.

Current Principal Place of Business:

572 S. BISCAYNE RIVER DRIVE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

572 S. BISCAYNE RIVER DRIVE
MIAMI, FL 33169

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NANGLE, PAULINE
572 S. BISCAYNE RIVER DRIVE
MIAMI, FL 33169 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: MGR
Name: NANGLE, PAULINE
Address: 572 S. BISCAYNE RIVER DRIVE
City-St-Zip: MIAMI, FL 33169

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: PAULINE NANGLE

P

04/28/2011

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