

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000051208

Entity Name: 7 SENSES THERAPY, LLC

FILED
Jan 04, 2012
Secretary of State

Current Principal Place of Business:

1751 SARNO ROAD
UNIT # 5
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

1751 SARNO ROAD
UNIT # 5
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 36-4697229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORES, LAUREN B
1751 SARNO ROAD
UNIT # 5
MELBOURNE, FL 32935 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: FLORES, ALEXIS H
Address: 2700 ALICIA LANE
City-St-Zip: MELBOURNE, FL 32935

Title: MGRM
Name: FLORES, LAUREN B
Address: 2700 ALICIA LANE
City-St-Zip: MELBOURNE, FL 32935

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: LAUREN B. FLORES

MGRM

01/04/2012

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