

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000057596

FILED
Sep 27, 2012
Secretary of State

Entity Name: EMERGENCY NUTRITION CENTER, LLC

Current Principal Place of Business:

4581 WESTON ROAD
149
WESTON, FL 33331 US

New Principal Place of Business:

Current Mailing Address:

4581 WESTON ROAD
149
WESTON, FL 33331 US

New Mailing Address:

FEI Number: 45-2611072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, ADOLPHO L
4581 WESTON ROAD
149
WESTON, FL 33331 US

Name and Address of New Registered Agent:

GOMEZ, ADOLFO L
4581 WESTON ROAD
149
WESTON, FL 33331 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: ADOLFO GOMEZ

09/27/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GOMEZ, ADOLFO L
Address: 4581 WESTON ROAD, #149
City-St-Zip: WESTON, FL 33331 US

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: ADOLFO GOMEZ

P

09/27/2012

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