2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L18219

FILED Apr 29, 2011 Secretary of State

Entity Name: LLERENA'S HEALTH MED-CENTRE, CORP.

Current Principal Place of Business:	New Principal Place of Business: New Mailing Address:
1451 SW 1ST	
1 MIAMI, FL 33135	
Current Mailing Address:	New Mailing Address:
1451 SW 1ST	
1 MIAMI, FL 33135	
FEI Number: 65-0155835 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
LLERENA, SARA N 11975 SW 46ST MIAMI, FL 33175 US	
The above named entity submits this statement for the p in the State of Florida.	ourpose of changing its registered office or registered agent, or
SIGNATURE:	
Electronic Signature of Registered Age	ent Date

Title: PD

Name: LLERENA, SARA N 11975 SW 46ST Address: City-St-Zip: MIAMI, FL 33175

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SARA N LLERENA PD 04/29/2011