

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000128

FILED
Apr 12, 2007
Secretary of State

Entity Name: ADVANCED BODYCARE SOLUTIONS, LLC

Current Principal Place of Business:

2600 N. MILITARY TRAIL
SUITE 410
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2600 N. MILITARY TRAIL
SUITE 410
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 04-3572917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELLER, BETH M
2600 N. MILITARY TRAIL
SUITE 410
BOCA RATON, FL 33431 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 () Delete
Name: GRILLO, VICTOR JR.
Address: 14 DOE SKIN DRIVE
City-St-Zip: FRAMINGHAM, MA US

Title: MGRM () Delete
Name: PRADELLI, CARL
Address: 2600 N. MILITARY TRAIL, SUITE 410
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: STEPHEN, PERRY
Address: 90 KERRY PLACE
City-St-Zip: NORWOOD, MA 02062 US

Title: MGRM () Delete
Name: VINCENT, DEGIAIMO
Address: 10 ROCKEFELLER PLAZA
City-St-Zip: NEW YORK, NY 10020 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: BETH GELLER

GC

04/12/2007

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