2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Feb 07, 2007
Secretary of State

DOCUMENT# M05000001754

Entity Name: RELIANCE PHARMACEUTICALS, LLC

Current Principal Place of Business:

3407 NW 9TH AVE
SUITE 250
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3407 NW 9TH AVE
SUITE 250
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 42-1641575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCLUSKEY & MCDONALD, PA
8821 SW 69TH COURT
MIAMI, FL 33156 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:	MOTHRA HOLDING COMPA, NY, LLC	
Address:	110 OSCEOLA CT	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	MGRM	(X) Delete
Name:	KARSCH, SAMUEL L	
Address:	3407 NW 9TH AVE, SUITE 250	
City-St-Zip:	FT. LAUDERDALE, FL 33309	
Title:	MGRM	(X) Delete
Name:	STORMES, LAWRENCE T	
Address:	3407 NW 9TH AVE, SUITE 250	
City-St-Zip:	FT. LAUDERDALE, FL 33309	
Title:	MGR	( ) Delete
Name:	ASPINALL, JAMES R	
Address:	4042 WINDERLAKES DRIVE	
City-St-Zip:	ORLANDO, FL 32835	

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: KATHRYN GOUDA MGRM 02/07/2007

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