

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000005512

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Entity Name:** IMMEDIATE MOLECULAR MANIPULATION MEDICAL TECHNOLOGIES, LLC

**Current Principal Place of Business:**

10960 WILSHIRE BOULEVARD, 5TH FLOOR  
LOS ANGELES, CA 90025

**New Principal Place of Business:**

2700 N. OCEAN DRIVE  
WEST PALM BEACH, FL 33404 US

**Current Mailing Address:**

10960 WILSHIRE BOULEVARD, 5TH FLOOR  
LOS ANGELES, CA 90025

**New Mailing Address:**

244 WEST 54TH STREET, 9TH FLOOR  
NEW YORK, NY 10019

**FEI Number:** 45-3584643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ERESIDENTAGENT, INC.  
236 E 6TH AVE.  
TALLAHASSEE, FL 32303 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: MGR  
Name: HEALTH CHAPLAINCY, LLC  
Address: 2700 N. OCEAN DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33404

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: JOSEPH P. FARRELL, HEALTH CHAPLAINCY, LLC MGR 03/09/2012

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