2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2013
Secretary of State
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Entity Name: DHARMA HEALTHCARE, LLC

Current Principal Place of Business:

3121 ARIZONA AVE
APT C
SANTA MONICA, CA 90404

Current Mailing Address:

3121 ARIZONA AVE
APT C
SANTA MONICA, CA 90404 US

FEI Number: 20-4566634

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANZANARES, MARIA C
1010 N 17TH AVE
HOLLYWOOD, FL 33020 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	MANZANARES, MARIA C
Address	1010 N 17TH AVE
City-State-Zip:	HOLLYWOOD FL 33020

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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIA C MANZANARES MGR 02/25/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date