

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000016196

Entity Name: PRO HEALTH ACUPUNCTURE, LLC

Current Principal Place of Business:

6967 W 24 CT
HIALEAH, FL 33016

Current Mailing Address:

6967 W 24 CT
HIALEAH, FL 33016 US

FEI Number: 45-4479842

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, BELKIS F
6967 W 24 CT
HIALEAH, FL 33016 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 DIAZ, BELKIS F
Address 6967 W 24 CT
City-State-Zip: HIALEAH FL 33016

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: BELKIS F DIAZ

MANAGER

03/06/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date