

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011960

Entity Name: IVALVE SYSTEMS, LLC

FILED  
Apr 22, 2009  
Secretary of State

**Current Principal Place of Business:**

3630 CONSUMER STREET  
SUITE 101  
RIVIERA BEACH, FL 33404 US

**New Principal Place of Business:**

**Current Mailing Address:**

3630 CONSUMER STREET  
SUITE 101  
RIVIERA BEACH, FL 33404 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

SINGER, MICHAEL S ESQ  
3801 PGA BOULEVARD  
SUITE 604  
PALM BEACH GARDENS, FL 33410 US

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

ROSENKRANZ, HOWARD  
3630 CONSUMER ST  
UNIT 101  
RIVIERA BEACH, FL 33404 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: HOWARD ROSENKRANZ

04/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ROSENKRANZ, HOWARD  
Address: 3630 CONSUMER STREET, SUITE 101  
City-St-Zip: PALM BEACH GARDENS, FL 33404 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify 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: HOWARD ROSENKRANZ

MGMR

04/22/2009

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