

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000024348

**Entity Name:** HI PERFORMANCE, LLC

**Current Principal Place of Business:**

3400 CORAL WAY  
#600  
MIAMI, FL 33145

**Current Mailing Address:**

C/O TOMAS KUCERA  
PO BOX 3032  
HALLANDALE, FL 33008

**FEI Number:** 99-0364342

**Certificate of Status Desired:** No

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

TOMAS KUCERA, P.A.  
3400 CORAL WAY  
#600  
MIAMI, FL 33145 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            KUCERA, TOMAS  
Address        PO BOX 3032  
City-State-Zip: HALLANDALE FL 33008

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

**SIGNATURE:** TOMAS KUCERA

MGR

04/29/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date