

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000118292

**Entity Name:** ELTECK USA, LLC

**Current Principal Place of Business:**

7901 KINGS POINTE PKWY  
STE 19  
ORLANDO, FL 32819

**Current Mailing Address:**

7901 KINGS POINTE PKWY  
STE 19  
ORLANDO, FL 32819 US

**FEI Number:** 47-4535435

**Certificate of Status Desired:** Yes

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

GUEDEZ, RAFAEL R  
2728 RANDAL WAY  
KISSIMMEE, FL 34743 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 AMBR  
Name GUEDEZ, RAFAEL R  
Address 2728 RANDAL WAY  
City-State-Zip: KISSIMMEE FL 34743

Title AMBR  
Name ARELLANO, JOSE A  
Address 13267 PENSHURST LANE  
City-State-Zip: WINDERMERE FL 34786

Title MGR  
Name GUEDEZ, RAFAEL R  
Address 2728 RANDAL WAY  
City-State-Zip: KISSIMMEE FL 34743

Title MGR  
Name ARELLANO, JOSE A  
Address 13267 PENSHURST LANE  
City-State-Zip: WINDERMERE FL 34786

*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:** JOSE A ARELLANO

**MEMBER**

**03/09/2016**

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

\_\_\_\_\_  
Date