## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L00000002566

Entity Name: TECHNIC PROTECTION, U.S.A., L.L.C.

FILED Jan 06, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10227 TARPON DRIVE TREASURE ISLAND, FL 33706

**Current Mailing Address: New Mailing Address:** 

10227 TARPON DRIVE TREASURE ISLAND, FL 33706

FEI Number: 59-3637381 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

OLLIER, BERTRAND 10227 TARPON DRIVE TREASURE ISLAND, FL 33706 US

**MANAGING MEMBERS/MEMBERS:** 

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:

Date

Electronic Signature of Registered Agent

**ADDITIONS/CHANGES:** 

(X) Change ( ) Addition () Delete

OLLIER, BERTRAND OLLIER, BERTRAND Name: Name: Address: 10227 TARPON DRIVE Address: 10227 TARPON DRIVE City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706

(X) Change ( ) Addition Title: () Delete Title: MGR

Name: GALIANA, RAFAEL Name: GALIANA, RAFAEL Address: 10227 TARPON DRIVE Address: 10227 TARPON DRIVE City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BERTRAND OLLIER 01/06/2004