

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001114

Entity Name: TECHPRO, LLC

FILED
Jul 13, 2008
Secretary of State

Current Principal Place of Business:

7390 W 18TH LANE
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

4115 PALMETTO TRAIL
WESTON, FL 33331

New Mailing Address:

13 GUMWOOD
IRVINE, CA 92612

FEI Number: 65-1071529 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CUEVAS, ANDREW ESQ.
536 BILTMORE WAY
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PIDERIT, JUAN CARLOS
Address: 4115 PALMETTO TRAIL
City-St-Zip: WESTON, FL 33331

Title: MGRM () Delete
Name: HERNANDEZ, ZULAY
Address: 4115 PALMETTO TRAIL
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PIDERIT, JUAN CARLOS
Address: 13 GUMWOOD
City-St-Zip: IRVINE, CA 92612

Title: MGRM (X) Change () Addition
Name: HERNANDEZ, ZULAY
Address: 13 GUMWOOD
City-St-Zip: IRVINE, CA 92612

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: JUAN CARLOS PIDERIT

MGRM

07/13/2008

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