

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90457 042 ****55.00

DOCUMENT # L03000004172

1. Entity Name

TELEMETRY INTERNATIONAL, LLC



Principal Place of Business

7180 EAST LAGO DRIVE
CORAL GABLES FL 33143-6512

Mailing Address

7180 EAST LAGO DRIVE
CORAL GABLES FL 33143-6512

2. Principal Place of Business

9060 Ludlam Road
Suite, Apt. #, etc.

3. Mailing Address

9060 Ludlam Road
Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33156-1710

Country

USA

Zip

33156-1710

Country

USA



MOORE

CR2E083 (11/03)

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME EXDEL CORPORATION
STREET ADDRESS 7180 EAST LAGO DRIVE
CITY-ST-ZIP CORAL GABLES FL 33143-6512

TITLE MGRM ☐ Delete
NAME PINA, MARIA
STREET ADDRESS 6425 MONTGOMERY DRIVE
CITY-ST-ZIP PINECREST FL 33156

TITLE MGRM ☐ Delete
NAME FERNANDEZ, GERARDO B
STREET ADDRESS 7300 SW 84TH PLACE
CITY-ST-ZIP MIAMI FL 33143

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME EXDEL CORPORATION
STREET ADDRESS 9060 SW 67 AVE.
CITY-ST-ZIP MIAMI FL 33156-1710

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

E. Delis for
EXDEL CORPORATION 4/13/04 305-6673548