

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052051

FILED  
May 28, 2008  
Secretary of State

Entity Name: PROTEUS CONCEPTS LLC

## Current Principal Place of Business:

9308 JAMAICA DRIVE  
MIAMI, FL 33189

## New Principal Place of Business:

700 S.W. 137TH AVENUE  
H-405  
PEMBROKE PINES, FL 33027 US

## Current Mailing Address:

9308 JAMAICA DRIVE  
MIAMI, FL 33189

## New Mailing Address:

700 S.W. 137TH AVENUE  
H-405  
PEMBROKE PINES, FL 33027 US

FEI Number: 83-0404076      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

RIERA, ADRIAN  
9308 JAMAICA DRIVE  
MIAMI, FL 33189 US

## Name and Address of New Registered Agent:

RIERA, ADRIAN  
700 S.W. 137TH AVENUE  
H-405  
PEMBROKE PINES, FL 33027 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: ADRIAN RIERA

05/28/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: RIERA, ADRIAN  
Address: 9308 JAMAICA DRIVE  
City-St-Zip: MIAMI, FL 33189

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: RIERA, ADRIAN  
Address: 700 S.W. 137TH AVENUE H-405  
City-St-Zip: PEMBROKE PINES, FL 33027 US

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: ADRIAN RIERA

MGR

05/28/2008

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