

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000053865

**FILED**  
**Mar 16, 2010**  
**Secretary of State**

**Entity Name:** PRO-OPTICAL, L.L.C.

**Current Principal Place of Business:**

2604 SAWGRASS CIRCLE #1125  
SUNRISE, FL 33323 US

**New Principal Place of Business:**

**Current Mailing Address:**

2604 SAWGRASS CIRCLE #1125  
SUNRISE, FL 33323 US

**New Mailing Address:**

**FEI Number:** 42-1649945

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOAR, MICHAEL S ESQ  
20900 N.E. 30TH AVENUE  
SUITE 600  
AVENTURA, FL 33180 US

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

KAPMAR, ILYA  
2604 SAWGRASS CIRCLE #1125  
SUNRISE, FL 33323 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: ILYA KAPMAR

03/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KAPMAR, ILYA  
Address: 2604 SAWGRASS CIRCLE #1125  
City-St-Zip: SUNRISE, FL 33323 US

I hereby 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: ILYA KAPMAR

MGMR

03/16/2010

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