

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000093953

Entity Name: SIOMEGA LLC

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

4611 SOUTH UNIVERSITY DR.  
SUITE #245  
DAVIE, FL 33328 US

## **New Principal Place of Business:**

4074 SW 101ST AVENUE  
DAVIE, FL 33328 US

## **Current Mailing Address:**

4611 SOUTH UNIVERSITY DR.  
SUITE #245  
DAVIE, FL 33328 US

## **New Mailing Address:**

4074 SW 101ST AVENUE  
DAVIE, FL 33328 US

FEI Number: 20-3488308

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAWRENCE A. LEVINE P.A.  
4300 N. UNIVERSITY DR.  
SUITE A-106  
FT. LAUDERDALE, FL 33351 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: MGR  
Name: MAILLOUX, MARTIN J  
Address: 4611 S. UNIVERSITY DR. SUITE #245  
City-St-Zip: DAVIE, FL 33328 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: MARTIN MAILLOUX

MGR

04/24/2012

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