2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# L06000034022

Entity Name: CYBERSTREME LLC

Current Principal Place of Business:

241 CHILSON AVE
ANNA MARIA, FL 34216

New Principal Place of Business:

Current Mailing Address:

PO BOX 1673
ANNA MARIA, FL 34216

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JENKINS, WALTER
241 CHILSON AVE
ANNA MARIA, FL 34216 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: JENKINS, WALT
Address: PO BOX 1673
City-St-Zip: ANNA MARIA, FL 34216

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 Statues.

SIGNATURE: WALTER JENKINS MGRM 04/26/2012

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