

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044027

Entity Name: CRYO HORSE (USA) LLC

FILED  
Apr 26, 2007  
Secretary of State

## Current Principal Place of Business:

3865 FALLSCRST CIRCLE  
CLERMONT, FL 34711 US

## New Principal Place of Business:

3865 FALLSCREST CIRCLE  
CLERMONT, FL 34711 US

## Current Mailing Address:

3865 FALLSCRST CIRCLE  
CLERMONT, FL 34711 US

## New Mailing Address:

3865 FALLSCREST CIRCLE  
CLERMONT, FL 34711 US

FEI Number: 42-1703384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JEFFERY, GUY D  
3865 FALLSCREST CIRCLE  
CLERMONT, FL 34711 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: MRGM ( ) Delete  
Name: JEFFERY, GUY D  
Address: 3865 FALLSCREST CIRCLE  
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR (X) Delete  
Name: VAN DEYNZE, BERT  
Address: BARON CAROLYLAAN 41, LIER,  
City-St-Zip: ANTWERP, BELGIUM, OC BE2500 OC

## ADDITIONS/CHANGES:

Title: MRGM (X) Change ( ) Addition  
Name: VAN DEYNZE, BERT  
Address: BARON CAROLYLAAN 41, LIER,  
City-St-Zip: LIER, BELGIUM, OC BE 2500 BE

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BERT VAN DEYNZE

MRGM

04/26/2007

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