

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053435

Entity Name: KRONUS CAPITAL LLC

FILED
Mar 16, 2007
Secretary of State

Current Principal Place of Business:

2333 BRICKELL AVE #1915
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

2333 BRICKELL AVE #1915
MIAMI, FL 33129

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE GERMAN CONSULTING GROUP, LLC
2333 BRICKELL AVE #1915
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

SEUSS CONSULTING GROUP, LLC
2333 BRICKELL AVE #1915
MIAMI, FL 33129 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: KATRIN SEUSS

03/16/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NOWAK, THOMAS
Address: 2333 BRICKELL AVE #1915
City-St-Zip: MIAMI, FL 33129

Title: MGR () Delete
Name: MEYER, THOMAS
Address: 2333 BRICKELL AVE #1915
City-St-Zip: MIAMI, FL 33129

Title: MGR () Delete
Name: SEUSS, STEFAN
Address: 2333 BRICKELL AVE #1915
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: STEFAN SEUSS

MGR

03/16/2007

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