

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000062877

Entity Name: MICROTECH, L.L.C.

FILED
Mar 03, 2008
Secretary of State

Current Principal Place of Business:

362 COMMERCIAL WAY
116
LONGWOOD, FL 32750

Current Mailing Address:

362 COMMERCIAL WAY
116
LONGWOOD, FL 32750

New Principal Place of Business:

362 COMMERCE WAY
116
LONGWOOD, FL 32750

New Mailing Address:

362 COMMERCE WAY
116
LONGWOOD, FL 32750

FEI Number: 20-5076934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, HUSSEIN
362 COMMERCIAL WAY
116
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

ALI, HUSSEIN
362 COMMERCE WAY
116
LONGWOOD, FL 32750 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: HUSSEIN ALI

03/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SULEIMAN, RAZA
Address: 362 COMMERCIAL WAY
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: ALI, HUSSEIN
Address: 362 COMMERCIAL WAY
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SULEIMAN, RAZA
Address: 362 COMMERCE WAY
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM (X) Change () Addition
Name: ALI, HUSSEIN
Address: 362 COMMERCE WAY
City-St-Zip: LONGWOOD, FL 32750

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: RAZA SULEIMAN

MGRM

03/03/2008

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