

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000063867

Entity Name: AI SQUARE, LLC

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

375 OCEAN OAKS DRIVE  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 33428  
INDIALANTIC, FL 32903

**New Mailing Address:**

PO BOX 33428  
INDIALANTIC, FL 32903

FEI Number: 20-5727622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STIVERS, H B  
245 EAST VIRGINIA STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

MILUCKY, JAMES J CPA  
1280 US HIGHWAY 1  
MALABAR, FL 32950 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: JAMES J. MILUCKY CPA

04/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGMR  
Name: IMAMI, IRFAN R MD  
Address: PO BX 33428  
City-St-Zip: INDIALANTIC, FL 32903 US

Title: MGMR  
Name: IMAMI, EMRAN R MD  
Address: P O BOX 33428  
City-St-Zip: INDIALANTIC, FL 32903 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: EMRAN IMAMI

MGMR

04/26/2012

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