

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114859

Entity Name: VANNIC USA LLC

FILED  
Apr 23, 2008  
Secretary of State

**Current Principal Place of Business:**

1328 NORTH FOXRUN TERRACE  
INVERNESS, FL 34453

**New Principal Place of Business:**

**Current Mailing Address:**

1328 NORTH FOXRUN TERRACE  
INVERNESS, FL 34453

**New Mailing Address:**

FEI Number: 56-2629617

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 33411 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:

04/23/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: IJBEMA, R.H.F.  
Address: TAMISWEER 43  
City-St-Zip: ASSENDELFT, NETHERLANDS, 1566 RS

Title: MGRM ( ) Delete  
Name: OLDENMENDER, H.  
Address: TAMISWEER 51  
City-St-Zip: ASSENDELFT, NETHERLANDS, 1566 RS

**ADDITIONS/CHANGES:**

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 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: RHF YBEMA

MGRM

04/23/2008

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