

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000002602

Entity Name: PRESENT WOUNDS, LLC

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

4800 NORTH FEDERAL HIGHWAY  
SUITE A306  
BOCA RATON, FL 33431

## **New Principal Place of Business:**

4800 NORTH FEDERAL HIGHWAY  
SUITE A306  
BOCA RATON, FL 33431 US

## **Current Mailing Address:**

4800 NORTH FEDERAL HIGHWAY  
SUITE A306  
BOCA RATON, FL 33431

## **New Mailing Address:**

4800 NORTH FEDERAL HIGHWAY  
SUITE A306  
BOCA RATON, FL 33431 US

FEI Number: 55-0815128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PBYA CORPORATE SERVICES, LLC  
200 SOUTH ANDREWS AVENUE  
SUITE 600  
FORT LAUDERDALE, FL 33301 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: MGR  
Name: SHORE, MICHAEL  
Address: 4800 NORTH FEDERAL HIGHWAY SUITE A306  
City-St-Zip: BOCA RATON, FL 33431

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: MICHAEL SHORE

MGR

03/29/2012

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