

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011731

Entity Name: ALTEJA TRADING LLC

FILED  
Mar 24, 2009  
Secretary of State

**Current Principal Place of Business:**

800 INDUS RD.  
VENICE, FL 34293 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 INDUS RD.  
VENICE, FL 34293 US

**New Mailing Address:**

FEI Number: 26-1873555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

USCORP LLC  
800 INDUS RD.  
VENICE, FL 34293 US

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

USCORP LLC  
351 VENICE AVENUE WEST  
VENICE, FL 34285 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: KAREL CABART

03/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BAKUS, JAN  
Address: NETLUCKA 634 B  
City-St-Zip: PRAGUE 10,, PR 10700 CR

Title: MGRM ( ) Delete  
Name: MAREK, EVZEN  
Address: JAR. HASKA 4455/15  
City-St-Zip: JIHLAVA, JI 58601 CR

Title: MGRM ( ) Delete  
Name: SULC, MAREK  
Address: MUSILKOVA 13  
City-St-Zip: PRAGUE 5, PR 15000 CR

**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 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: JAN BAKUS

MGRM

03/24/2009

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