

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028760

Entity Name: PROTEQ31, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

525 SOUTH FLAGLER DRIVE, STE. 200
WEST PALM BEACH, FL 33401

Current Mailing Address:

525 SOUTH FLAGLER DRIVE, STE. 200
WEST PALM BEACH, FL 33401

New Principal Place of Business:

6742 FOREST HILL BLVD.
205
WEST PALM BEACH, FL 33413

New Mailing Address:

6742 FOREST HILL BLVD.
205
WEST PALM BEACH, FL 33413

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESCHES, LARRY M
525 SOUTH FLAGLER DRIVE, STE. 200
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

ZANDEL, ROCHELLE S S
6742 FOREST HILL BLVD.
205
WEST PALM BEACH, FL 33413 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: ROCHELLE S. ZANDEL

04/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: CEO () Change (X) Addition
Name: GOLDMAN, ROBERT S
Address: 6742 FOREST HILL BLVD., SUITE 205
City-St-Zip: WEST PALM BEACH, FL 33413

Title: COO () Change (X) Addition
Name: PALMER, TIMOTHY
Address: 6742 FOREST HILL BLVD. SUITE 205
City-St-Zip: WEST PALM BEACH, FL 33413

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: ROBERT S. GOLDMAN

PRES

04/14/2009

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