

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045985

Entity Name: SOFTASPECTS LLC

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

18813 TRACER DRIVE
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

18813 TRACER DRIVE
LUTZ, FL 33549

New Mailing Address:

FEI Number: 26-2707469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWENGLER, PAUL
18813 TRACER DRIVE
LUTZ, FL 33549 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: MGRM () Delete
Name: LYUBCHENKO, MICHAEL
Address: OTAKARA YAROSHA STREET, B.53, APT. 15
City-St-Zip: KHARKOV, UKRAINE, // 61072 //

Title: CEO () Delete
Name: LYUBCHENKO, MICHAEL
Address: OTAKARA YAROSHA STREET, B.53, APT. 15
City-St-Zip: KHARKOV, UKRAINE, // 61072 //

Title: COO () Delete
Name: SWENGLER, PAUL
Address: 18813 TRACER DRIVE
City-St-Zip: LUTZ, FL 33549

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: PAUL SWENGLER

COO

03/16/2009

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