

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000022973

Entity Name: MICROINSIGHT, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1464 SUMTER LN  
W MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 121341  
MELBOURNE, FL 32912

**New Mailing Address:**

FEI Number: 26-3973621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHIN, A A  
1464 SUMTER LN  
W MELBOURNE, FL 32904 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  
Name: CHIN, A A  
Address: P.O. BOX 121341  
City-St-Zip: MELBOURNE, FL 32912

Title: MGRM  
Name: WILLIAMS, A M  
Address: P.O. BOX 121341  
City-St-Zip: MELBOURNE, FL 32912

Title: TREA  
Name: CHIN, K S  
Address: P.O. BOX 121341  
City-St-Zip: MELBOURNE, FL 32912

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: ALBERT CHIN

MGRM

04/30/2012

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