

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000022984

FILED
Apr 08, 2012
Secretary of State

Entity Name: PROTEIN DELIVERY SOLUTIONS, LLC

Current Principal Place of Business:

7200 CAMINO REAL
SUITE 102
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

7200 CAMINO REAL
SUITE 102
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 26-4414590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOHRMAN, TROY
3241 SW WINDING WAY
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

FOHRMAN, TROY
7200 CAMINO REAL
SUITE 102
BOCA RATON, FL 33433 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:

04/08/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: US DEVELOPMENT TECHNOLOGIES, LLC
Address: 7200 CAMINO REAL, SUITE 102
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM
Name: PRODEVO, LLC
Address: 4419 CENTENNIAL BLVD., #201
City-St-Zip: COLORADO SPRINGS, CO 80907 US

Title: MGR
Name: BUSCH, HOWARD
Address: 7200 CAMINO REAL, SUITE 102
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGR
Name: SAMUELS, RICHARD
Address: 7200 CAMINO REAL, SUITE 102
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGR
Name: CARVER, DAVID
Address: 4419 CENTENNIAL BLVD., #201
City-St-Zip: COLORADO SPRINGS, CO 80907 US

Title: MGR
Name: FOHRMAN, TROY
Address: 7200 CAMINO REAL, SUITE 102
City-St-Zip: BOCA RATON, FL 33433 US

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: RICHARD SAMUELS

CFO

04/08/2012

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