

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000037894

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Entity Name:** OPTIMUM TECHNOLOGIES, LLC

**Current Principal Place of Business:**

6429 SHADOW CREEK VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US

**New Principal Place of Business:**

301 CLEMATIS STREET  
SUITE 3000  
WEST PALM BEACH, FL 33401 US

**Current Mailing Address:**

6429 SHADOW CREEK VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US

**New Mailing Address:**

**FEI Number:** 35-2365335      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

COLON, HENRY  
6429 SHADOW CREEK VILLAGE CIRCLE  
LAKE WORTH, FL 33463 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:** COLON, HENRY  
**Address:** 6429 SHADOW CREEK VILLAGE CIRCLE  
**City-St-Zip:** LAKE WORTH, FL 33463 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: HENRY COLON

CEO

03/26/2012

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