

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000048523

Entity Name: TRAFIK NETWORKS LLC

**FILED**  
**Feb 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

95 NE 4TH AVE, UNIT 100  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

95 NE 4TH AVE, UNIT 100  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 27-0258628

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHANER, ROBERT  
95 NE 4TH AVE  
UNIT 100  
DELRAY BEACH, FL 33483 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: MGR  
Name: FREED, CHRISTOPHER  
Address: 821 N. RIVERSIDE DR APT #303  
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR  
Name: CAUTREELS, JURGEN  
Address: 253 ISLE VERDE WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGR  
Name: SHANER, ROBERT H  
Address: 95 NE 4TH AVE, UNIT 100  
City-St-Zip: DELRAY BEACH, FL 33483

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: ROBERT SHANER

MGR

02/23/2012

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