

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070119

FILED
Apr 27, 2012
Secretary of State

Entity Name: CATASTROPHIC SERVICES USA LLC

Current Principal Place of Business:

163 ROSEWOOD AVE
ORMOND BEACH, FL 321745524 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2085
CYPRESS, TX 774102085 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANDOLA, JAY C
163 ROSEWOOD AVE
ORMOND BEACH, FL 321745524 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: MANDOLA, JAY C
Address: P.O. BOX 2085
City-St-Zip: CYPRESS, TX 774102085 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: JAY C. MANDOLA

MGRM

04/27/2012

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