

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070566

Entity Name: TECHNOSYSTEMS LLC

FILED  
Jan 04, 2012  
Secretary of State

**Current Principal Place of Business:**

6135 NW 167TH STREET  
UNIT E1  
HIALEAH, FL 33015 US

**New Principal Place of Business:**

**Current Mailing Address:**

6135 NW 167TH STREET  
UNIT E1  
HIALEAH, FL 33015 US

**New Mailing Address:**

FEI Number: 27-0599706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPARFEL, THIERRY P  
6135 NW 167TH STREET  
HIALEAH, FL 33015 US

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

SPARFEL, THIERRY P  
6135 NW 167TH STREET  
UNIT E1  
HIALEAH, FL 33015 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: THIERRY SPARFEL

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SPARFEL, THIERRY P  
Address: 6135 NW 167TH STREET, UNIT E1  
City-St-Zip: HIALEAH, FL 33015 US

Title: MGRM  
Name: SPARFEL, DOMINIQUE  
Address: 6135 NW 167TH STREET, UNIT E1  
City-St-Zip: HIALEAH, FL 33015 US

Title: MGR  
Name: STAMPER, AMIR  
Address: 6135 NW 167TH STREET, UNIT E1  
City-St-Zip: HIALEAH, FL 33015 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: THIERRY SPARFEL

MR

01/04/2012

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