

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000082897

Entity Name: DEADSTOCKLIST LLC

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

851 THREE ISLAND BLVD., #409  
HALLANDALE, FL 33009

**New Principal Place of Business:**

851 THREE ISLAND BLVD  
409  
HALLANDALE, FL 33009

**Current Mailing Address:**

851 THREE ISLAND BLVD., #409  
HALLANDALE, FL 33009

**New Mailing Address:**

851 THREE ISLAND BLVD.  
409  
HALLANDALE, FL 33009

FEI Number: 27-0827446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: MBRM  
Name: LOZANO, RICARDO  
Address: 851 THREE ISLAND BLVD. #409  
City-St-Zip: HALLANDALE, FL 33009

Title: MGRM  
Name: BALLHORN, HEIKO  
Address: 9101 W SAHARA AVENUE SUITE 105-E 28  
City-St-Zip: LAS VEGAS, NV 89117

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: RICARDO LOZANO

CEO

04/28/2010

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