

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000100625

Entity Name: MEDIUMFOUR CAPITAL, LLC

FILED
Apr 26, 2012
Secretary of State

Current Principal Place of Business:

690 NE 13TH STREET
SUITE 103
FT. LAUDERDALE, FL 33304

Current Mailing Address:

690 NE 13TH STREET
SUITE 103
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

401 EAST LAS OLAS BOULEVARD
SUITE 130-542
FT. LAUDERDALE, FL 33301

New Mailing Address:

401 EAST LAS OLAS BOULEVARD
SUITE 130-542
FT. LAUDERDALE, FL 33301

FEI Number: 27-1126199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILLYAU, DANTE
690 NE 13TH STREET
SUITE 103
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

FILLYAU, DANTE
401 EAST LAS OLAS BOULEVARD
SUITE 130-542
FORT LAUDERDALE, FL 33301 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: DANTE FILLYAU

04/26/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BIRJU, DAVID
Address: 401 EAST LAS OLAS BOULEVARD, SUITE 130-542
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MGRM
Name: BIRJU, MARCUS
Address: 401 EAST LAS OLAS BOULEVARD, SUITE 130-542
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MGR
Name: FILLYAU, DANTE
Address: 401 EAST LAS OLAS BOULEVARD, SUITE 130-542
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MGR
Name: HALL, MICHAEL
Address: 401 EAST LAS OLAS BOULEVARD, SUITE 130-542
City-St-Zip: FT. LAUDERDALE, FL 33301

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: DAVID BIRJU

MGRM

04/26/2012

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