

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000119506

**Entity Name:** BOCAVOX TELECOM LLC

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2900 GLADES CIRCLE  
STE 500  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

345 ALEXANDRA CIRCLE  
WESTON, FL 33326

**New Mailing Address:**

**FEI Number:** 24-4477212

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SABAT, JOSE H  
345 ALEXANDRA CIRCLE  
WESTON, FL 33326 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: SABAT, JOSE H  
Address: 345 ALEXANDRA CIRCLE  
City-St-Zip: WESTON, FL 33326

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: JOSE SABAT

MNGR

02/07/2012

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