

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000021484

Entity Name: TECPRO, LLC

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8004 NW 154 ST  
614  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

8004 NW 154 ST  
614  
MIAMI LAKES, FL 33016

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

ESCOBAR, MARILYN  
7120 NW 169 ST.  
MIAMI LAKES, FL 33015      US

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

ESCOBAR, MARILYN  
8004 NW 154 ST #614  
MIAMI LAKES, FL 33016      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: MARILYN ESCOBAR

04/27/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ESCOBAR, MARILYN  
Address: 8004 NW 154 ST #614  
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGRM  
Name: ESCOBAR, WILLIAM  
Address: 8004 NW 154 ST #614  
City-St-Zip: MIAMI LAKES, FL 33016

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: MARILYN ESCOBAR

MGRM

04/27/2012

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