

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000038543

FILED
Apr 05, 2011
Secretary of State

Entity Name: LUMENOR ENERGY SERVICES LLC

Current Principal Place of Business:

1111 KANE CONCOURSE, STE 301
BAY HARBOR ISLAND, FL 33154

New Principal Place of Business:

110 EAST BROWARD BOULEVARD
SUITE 1700
FORT LAUDERDALE, FL 33301

Current Mailing Address:

1111 KANE CONCOURSE, STE 301
BAY HARBOR ISLAND, FL 33154

New Mailing Address:

110 EAST BROWARD BOULEVARD
SUITE 1700
FORT LAUDERDALE, FL 33301

FEI Number: 27-2333965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR
Name: MATTEN, DAVID
Address: 110 EAST BROWARD BOULEVARD, SUITE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR
Name: OVADIA, RAMI
Address: 110 EAST BROWARD BOULEVARD, SUITE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR
Name: OVADIA, ROSE
Address: 110 EAST BROWARD BOULEVARD, SUITE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR
Name: MATATYAH0, SHEILA
Address: 110 EAST BROWARD BOULEVARD, SUITE 1700
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S
Name: MATTEN, DAVID
Address: 110 EAST BROWARD BOULEVARD, SUITE 1700
City-St-Zip: FORT 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 MATTEN

MGR

04/05/2011

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