

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000049544

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Entity Name:** VECTOR MAX LLC

**Current Principal Place of Business:**

8846 SW 129 TERRACE  
SUITE 203  
MIAMI, FL 33176

**New Principal Place of Business:**

8846 SW 129 TERRACE  
MIAMI, FL 33176

**Current Mailing Address:**

8846 SW 129 TERRACE  
SUITE 203  
MIAMI, FL 33176

**New Mailing Address:**

8846 SW 129 TERRACE  
MIAMI, FL 33176

**FEI Number:** 27-2529364

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEDALLION BUILDERS INC.  
9840 SW 77TH AVE  
SUITE 203  
MIAMI, FL 33156 US

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

MEDALLION BUILDERS INC.  
8846 SW 129 TERRACE  
MIAMI, FL 33176 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:

03/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MEDALLION BUILDERS INC.  
Address: 8846 SW 129 TERRACE  
City-St-Zip: MIAMI, FL 33176

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: MEDALLION BUILDERS INC

MGRM

03/16/2012

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