

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064993

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** PRO DECON INDUSTRIES, L.L.C.

**Current Principal Place of Business:**

12219 BRONSON WAY  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

12219 BRONSON WAY  
ORLANDO, FL 32824

**New Mailing Address:**

**FEI Number:** 27-2838995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NIEVES, GLIDDEN  
12219 BRONSON WAY  
ORLANDO, FL 32824 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:** NIEVES, GLIDDEN MR.  
**Address:** 12219 BRONSON WAY  
**City-St-Zip:** ORLANDO, FL 32824

**Title:** MGR  
**Name:** NIEVES, JERRY MR.  
**Address:** 401 FOUNTAINHEAD CIRCLE APT.149  
**City-St-Zip:** KISSIMMEE, FL 34741

**Title:** MGR  
**Name:** NIEVES, AMBYR MRS.  
**Address:** 12219 BRONSON WAY  
**City-St-Zip:** ORLANDO, FL 32824

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:** GLIDDEN NIEVES

MGRM

04/29/2011

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