

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000121812

Entity Name: PRONIX LLC

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

17888 67TH COURT NORTH LOXAHATCHEE  
PALM BEACH  
LOXAHATCHEE, FL 33470 FL

**New Principal Place of Business:**

**Current Mailing Address:**

17888 67TH COURT NORTH LOXAHATCHEE  
PALM BEACH  
LOXAHATCHEE, FL 33470 FL

**New Mailing Address:**

FEI Number: 39-2077640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH LOXAHATCHEE, FL  
PALM BEACH  
LOXAHATCHEE, FL 33470 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: VASILEC, DMITRIY A SR.  
Address: KALININGRAD MATOCHKINA ST. 16 RV 34  
City-St-Zip: KALINIGRAD, FL 238542 RU

Title: MGRM  
Name: PECHNIKOV, MAXIM A SR.  
Address: KALININGRAD MATOCHKINA ST. 16 RV 34  
City-St-Zip: KALINIGRAD, RU 238542 RU

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: VASILETC DMITRIY

MR

04/01/2011

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