

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000004851

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** BELA VIDA INTERNATIONAL, LLC

**Current Principal Place of Business:**

650 BANYAN CIRCLE  
NAPLES, FL 34102

**New Principal Place of Business:**

1550 GALLEON DR.  
NAPLES, FL 34102

**Current Mailing Address:**

650 BANYAN CIRCLE  
NAPLES, FL 34102

**New Mailing Address:**

1550 GALLEON DR.  
NAPLES, FL 34102

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WAACK VAN WASSEN, TORSTEN  
650 BANYAN CIRCLE  
NAPLES, FL 34102 US

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

MOATS, JEFFREY  
1550 GALLEON DR.  
NAPLES, FL 34102 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: JEFFREY A MOATS

01/09/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MOATS, JEFFREY  
Address: 1550 GALLEON DR.  
City-St-Zip: NAPLES, FL 34102

Title: MGR  
Name: PAPPAS, LEO  
Address: 169 ANNA AVE NW  
City-St-Zip: CANTON, OH 44708

Title: MGR  
Name: ROWE, CYNDI  
Address: 169 ANNA AVE NW  
City-St-Zip: CANTON, OH 44708

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: JEFFREY A MOATS

MGRM

01/09/2012

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