

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000006619

Entity Name: SIMATRIX, LLC

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2046 SHDOW LN  
CLEARWATER, FL 33763

**New Principal Place of Business:**

2046 SHDOW LN  
CLEARWATER, FL 33763 UN

**Current Mailing Address:**

2046 SHDOW LN  
CLEARWATER, FL 33763

**New Mailing Address:**

2046 SHDOW LN  
CLEARWATER, FL 33763 UN

FEI Number: 27-5465152

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REPAK, PETER  
2046 SHDOW LN  
CLEARWATER, FL 33763 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: REPAK, PETER  
Address: 2046 SHDOW LN  
City-St-Zip: CLEARWATER, FL 33763

Title: MGRM  
Name: HIRKU, JOZSEF  
Address: 1799 N HIGHLAND AVE. T55  
City-St-Zip: CLEARWATER, FL 33755

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: PETER REPAK

CEO

04/10/2012

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