

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000024736

Entity Name: DMP USA, LLC

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

**Current Principal Place of Business:**

581 INNER CIRCLE  
THE VILLAGES, FL 32162

**New Principal Place of Business:**

**Current Mailing Address:**

581 INNER CIRCLE  
THE VILLAGES, FL 32162

**New Mailing Address:**

FEI Number: 45-1534456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPEHAR, EDWARD  
581 INNER CIRCLE  
THE VILLAGES, FL 32162 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: MGR  
Name: PRANTSIDIS, DIMITRI  
Address: 1ST KM KALYVION AVENUE, MARKOPOULO  
City-St-Zip: INDUSRIAL ZONE 190 03 GREECE, XX XX

Title: MGRM  
Name: SPEHAR, EDWARD  
Address: 581 INNER CIRCLE  
City-St-Zip: THE VILLAGES, FL 32162

Title: MGR  
Name: REICHERT, BRIAN  
Address: 153 FIRST AVENUE  
City-St-Zip: WEST HAVEN, CT 06516

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: EDWARD SPEHAR

MGRM

01/10/2012

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