

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000059973

**FILED**  
**Mar 01, 2012**  
**Secretary of State**

**Entity Name:** DENKER SUPPLIER LLC

**Current Principal Place of Business:**

901 BRICKELL KEY BLVD  
SUITE 601  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 BRICKELL KEY BLVD  
SUITE 601  
MIAMI, FL 33131 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: TORRES, GIOVANNI  
Address: 901 BRICKELL KEY BLVD, SUITE 601  
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM  
Name: REYES, ABEL  
Address: 901 BRICKELL KEY BLVD, SUITE 601  
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM  
Name: ARCE, DIEGO  
Address: 901 BRICKELL KEY BLVD, SUITE 601  
City-St-Zip: MIAMI, FL 33131 US

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: GIOVANNI TORRES                      MGRM                      03/01/2012

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