

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000078114

Entity Name: IDEA180, LLC

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

**Current Principal Place of Business:**

1591 NE MIAMI GARDENS DRIVE  
215  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 630272  
MIAMI, FL 33163

**New Mailing Address:**

FEI Number: 45-2691894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERCHICK, BRIAN  
300 SCOTIA DRIVE  
105  
HYPOLUXO, FL 33462 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: PERCHICK, BRIAN  
Address: 300 SCOTIA DRIVE APT 105  
City-St-Zip: HYPOLUXO, FL 33462

Title: MGR  
Name: QUISPE, JESUS  
Address: 1591 NW MIAMI GARDENS DRIVE APT 215  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: MGR  
Name: BIFFULCO, GEAN  
Address: P.O. BOX 630272  
City-St-Zip: MIAMI, FL 33163

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: GEAN BIFFULCO

MGRM

04/10/2012

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