

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000080485

Entity Name: COREK LLC

**FILED**  
**Feb 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

347 N. NEW RIVER DR. E#305  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

347 N. NEW RIVER DR. E  
#305  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

P.O. BOX 30094  
FORT LAUDERDALE, FL 33303

**New Mailing Address:**

FEI Number: 45-2851694

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THACKREY, DEREK  
347 N. NEW RIVER DR. E#305  
FORT LAUDERDALE, FL 33301 US

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

THACKREY, DEREK  
347 N. NEW RIVER DR. E  
#305  
FORT LAUDERDALE, FL 33301 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: DEREK THACKREY

02/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: THACKREY, DEREK  
Address: P.O. BOX 30094  
City-St-Zip: FORT LAUDERDALE, FL 33303

Title: MGR  
Name: LAMAY, CORY  
Address: 250 CITY VIEW DR.  
City-St-Zip: FORT LAUDERDALE, FL 33311

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: DEREK THACKREY

MGR

02/20/2012

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