

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000091686

Entity Name: DMISEM LLC

**FILED**  
**Feb 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

925 E. MAGNOLIA DR.,  
APT. E-5  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

925 E. MAGNOLIA DR.,  
APT. E-5  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

FEI Number: 45-2952029

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEMENOV, DMITRY  
925 E. MAGNOLIA DR.  
APT. E-5  
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: MGR  
Name: SEMENOV, DMITRY  
Address: 925 E. MAGNOLIA DR., APT. E-5  
City-St-Zip: TALLAHASSEE, FL 32301 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: DMITRY SEMENOV

MGR

02/11/2012

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