

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000092197

Entity Name: SYNERGYCUBED, LLC

FILED
Apr 30, 2012
Secretary of State

Current Principal Place of Business:

4941 N HARBOR ISLES DR
FT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

4941 N HARBOR ISLES DR
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 45-2985517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND STREET
4TH FLOOR
MIAMI, FL 33145 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: WOLLAN, COSMO
Address: 4941 N HARBOR ISLES DR
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: MGRM
Name: VAN DEVENTER, CARON PHD
Address: 4941 N HARBOR ISLES DR
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: MGRM
Name: COTTERELL, ANDREW
Address: 6939 TOWN HARBOUR BLVD
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM
Name: RAHAL, MUSTAPHA
Address: 3675 N COUNTRY CLUB DRIVE
City-St-Zip: AVENTURA, FL 33180 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: COSMO WOLLAN

MGRM

04/30/2012

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