

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000102158

Entity Name: PRODULIFE USA LLC

**FILED**  
**Jun 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

201 ALHAMBRA CIRCLE  
SUITE 501  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

4005 NW 114TH AVE  
STE 15  
DORAL, FL 33178

**Current Mailing Address:**

201 ALHAMBRA CIRCLE  
SUITE 501  
CORAL GABLES, FL 33134

**New Mailing Address:**

4005 NW 114TH AVE  
STE 15  
DORAL, FL 33178

FEI Number: 45-3192683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BECERRA, OSCAR  
8043 NW 114 PATH  
DORAL, FL 33178 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: RUBINSTEIN, PABLO  
Address: 3301 NE 1 AVENUE, #1706  
City-St-Zip: MIAMI, FL 33137

Title: MGR  
Name: BECERRA, OSCAR  
Address: 8043 NW 114TH PATH  
City-St-Zip: DORAL, FL 33178

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: OSCAR BECERRA

MGR

06/05/2012

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