

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

DOCUMENT# L11000107981

**FILED**  
**Mar 30, 2012**  
**Secretary of State**

**Entity Name:** WAVE ELECTRIC INTERNATIONAL, LLC

**Current Principal Place of Business:**

159 SEGOVIA ROAD  
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

159 SEGOVIA ROAD  
ST AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 45-3342868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRICH, MARK R  
159 SEGOVIA ROAD  
ST AUGUSTINE, FL 32086 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: ZULAUF, THOMAS J DR.  
Address: 136 ANASTASIA LAKES DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32080 US

Title: MGR  
Name: FRICH, MARK R  
Address: 159 SEGOVIA ROAD  
City-St-Zip: ST AUGUSTINE, FL 32086 US

Title: MGR  
Name: MATHEW, LAHTI P.E.  
Address: 404 SHORE DR.  
City-St-Zip: ST.AUGUSTINE, FL 32086

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: DR.THOMAS ZULAUF

MGR

03/30/2012

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