

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000110568

Entity Name: VILLA SILVICON LLC

FILED
Apr 26, 2012
Secretary of State

Current Principal Place of Business:

420 LEE BLVD.
LEHIGH ACRES, FL 33936

New Principal Place of Business:

Current Mailing Address:

AM DRESCHPLATZ 21
LABOE, 24235 GE

New Mailing Address:

AM DRESCHPLATZ 21
LABOE, GE 24235 GE

FEI Number: 80-0757700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OELERKING, ULRIKE
420 LEE BLVD.
LEHIGH ACRES, FL 33936 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: MGMR
Name: TRONNIER, MATTHIAS
Address: AM DRESCHPLATZ 21
City-St-Zip: LABOE, GE 24235 GE

Title: MGMR
Name: OELERKING, KNUD
Address: AM DRESCHPLATZ 21
City-St-Zip: LABOE, GE 24235 GE

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: KNUD OELERKING

MGMR

04/26/2012

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