

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000129576

Entity Name: AGIMEX LLC

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1505 LEGENDS BLVD  
UNIT 2  
CHAMPIONS GATE, FL 33896 UN

**New Principal Place of Business:**

**Current Mailing Address:**

1505 LEGENDS BLVD  
UNIT 2  
CHAMPIONS GATE, FL 33896 UN

**New Mailing Address:**

FEI Number: 45-3805619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HEXAGON INTERNATIONAL INC  
1505 LEGENDS BLVD  
UNIT 4  
CHAMPIONS GATE, FL 33896 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: CENTRA MACKENZIE DEVELOPMENTS INC  
Address: 1505102 BLOOR STREET WEST  
City-St-Zip: TORONTO, CA M5S1M-8 CA

Title: MGR  
Name: SANCHEZ, MIGUEL  
Address: 1505 LEGENDS BLVD  
City-St-Zip: CHAMPIONS GATE, FL 33896

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: CENTRA MACKENZIE DEVELOPMENTS INC

MGRM

04/27/2012

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