

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90076 044 *****55.00

DOCUMENT # M02000000077

1. Entity Name
VERQUIS LLC



Principal Place of Business
**4800 T-REX AVE., STE. 100
BOCA RATON, FL 33434**

Mailing Address
**4800 T-REX AVE., STE. 100
BOCA RATON, FL 33434**

24058757



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04092004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
65-0746106

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMAS, ROBERT L JR
3008 NW 29TH AVE
BOCA RATON, FL 33434**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ON GUARD PLUS LIMITED
MILLBRIDGE HOUSE FRENTHAM FARNHAM SURREY
GU10 3AB ENGLAND**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ON GUARD PLUS LIMITED
10 ST. GEORGES YARD
FARNHAM, SURREY ENGLAND GU9 7LF**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
THOMAS, ROBERT L JR
3008 NW 29TH AVE.
BOCA RATON, FL 33434**

☐ Delete

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Robert L Thomas Jr* **ROBERT L. THOMAS JR MGR** 4/26/04 5612417223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #