

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000091614

FILED
Jul 28, 2008
Secretary of State

Entity Name: TECH-RIX, LLC

Current Principal Place of Business:

2020 NE 163RD STREET
#300
N. MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

2020 NE 163RD STREET
#300
N. MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 11-3790398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SCHLAEPFER FADUL, ROGERIO
19370 N. COLLINS AVE.
SUNNY ISLES BEACH, FL 33160 US

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 () Delete
Name: PNEUSERVICE COM.IND., LTDA
Address: AV. BARROS REIS #2414 RETIRO
City-St-Zip: SALVADOR BAHIA CEP BRAZIL,

Title: MGRM () Delete
Name: HELIO AUGUSTO GUIMAR, AES ESPINOZA
Address: R. FERNANDO MAENEZES DE SOES 545#506-PITUB
City-St-Zip: SALVADOR BA 41820-0350 BRAZI,

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: HELIO AUGUSTO GUIMARAES ESPINOZA

MGMR

07/28/2008

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