

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000011595

**Entity Name:** IRCAMERAS LLC**Current Principal Place of Business:**3000 TAFT STREET  
HOLLYWOOD, FL 33021**Current Mailing Address:**3000 TAFT STREET  
HOLLYWOOD, FL 33021**FEI Number:** 27-4686945**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PALLOT, JOSEPH W  
825 BRICKELL BAY DRIVE  
SUITE 1644  
MIAMI, FL 33131 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

**Authorized Person(s) Detail :**

Title	T
Name	MACAU, CARLOS L
Address	3000 TAFT STREET
City-State-Zip:	HOLLYWOOD FL 33021
Title	C
Name	BARONE, CARMEN
Address	30 S. CALLE CESAR CHAVEZ SUITE D
City-State-Zip:	SANTA BARBARA CA 93103
Title	ASST. SECRETARY
Name	LETENDRE, ELIZABETH R
Address	3000 TAFT STREET
City-State-Zip:	HOLLYWOOD FL 33021

Title	P
Name	MCHUGH, STEPHEN
Address	30 SOUTH CALLE CESAR CHAVEZ, #D
City-State-Zip:	SANTA BARBARA CA 93103
Title	SECRETARY
Name	VETTER, JUDITH W
Address	825 BRICKELL BAY DRIVE #1643 MIAMI, FL
City-State-Zip:	33131 FL 33131

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** CARLOS L. MACAU**TREASURER****04/15/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date