

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000129155

Entity Name: OKTAVIS LLC

Current Principal Place of Business:

8870 N HIMES AVENUE
SUITE 352
TAMPA, FL 33614

Current Mailing Address:

8870 N HIMES AVENUE
SUITE 352
TAMPA, FL 33614

FEI Number: 46-1159956

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBE, HANS-JOACHIM
8870 N HIMES AVENUE
SUITE 352
TAMPA, FL 33614 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 MGRM
Name FRANKENSTEIN, JENS
Address 554 19TH STREET NW
City-State-Zip: RUSKIN FL 33570

Title MGRM
Name ROBE, HANS-JOACHIM
Address 8870 N HIMES AV #351
City-State-Zip: TAMPA FL 33614

Title MGRM
Name VANA, MICHAEL
Address 5998 13TH STREET NORTH
City-State-Zip: ST.PETERSBURG FL 33703

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HANS-JOACHIM ROBE

MANAGING MEMBER

04/27/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date