

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000004913

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** SOUTO PROPERTIES, L.L.C.

**Current Principal Place of Business:**

5605 NW 82 AVENUE  
DORAL, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

5605 NW 82 AVENUE  
DORAL, FL 33166 US

**New Mailing Address:**

**FEI Number:** 65-1100106

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASAL, JULIAN CFO  
5605 NW 82 AVENUE  
DORAL, FL 33166 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:** MGR  
**Name:** SOUTO, JOSE ALBERTO  
**Address:** 5605 NW 82ND AVENUE  
**City-St-Zip:** DORAL, FL 33166

**Title:** MGR  
**Name:** SOUTO, HAYDEE  
**Address:** 5605 NW 82ND AVENUE  
**City-St-Zip:** DORAL, FL 33166

**Title:** MGR  
**Name:** SOUTO, JOSE E  
**Address:** 5605 NW 82ND AVENUE  
**City-St-Zip:** DORAL, FL 33166

**Title:** MGR  
**Name:** SOUTO, ANGEL L  
**Address:** 5605 NW 82ND AVENUE  
**City-St-Zip:** DORAL, FL 33166

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:** JULIAN CASAL

CFO

01/07/2010

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