

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020991

Entity Name: ISLA ESMERALDA, L.L.C.

FILED  
Mar 21, 2012  
Secretary of State

**Current Principal Place of Business:**

2199 PONCE DE LEON BLVD.  
#301  
MIAMI, FL 33134

**New Principal Place of Business:**

9485 SW 72ND ST  
A-190  
MIAMI, FL 33173

**Current Mailing Address:**

2199 PONCE DE LEON BLVD.  
#301  
MIAMI, FL 33134

**New Mailing Address:**

9485 SW 72ND ST  
A-190  
MIAMI, FL 33173

FEI Number: 22-3851105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEWART AGENT SERVICES  
2199 PONCE DE LEON BLVD.  
SUITE 301  
MIAMI, FL 33134 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: MGRM  
Name: STINSON, LOUIS JR  
Address: 2199 PONCE DE LEON BLVD. #301  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR  
Name: JORDAN, KATHRYN D  
Address: 2199 PONCE DE LEON BLVD. #301  
City-St-Zip: CORAL GABLES, FL 33134

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: LOUIS STINSON, JR.

MGRM

03/21/2012

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