

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013118

FILED
Apr 10, 2012
Secretary of State

Entity Name: AC HOM, LLC

Current Principal Place of Business:

135 SAN LORENZO AVENUE
PH 840
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

135 SAN LORENZO AVENUE
PH 840
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GEOFFREY M. WAYNE, P.A.
135 SAN LORENZO AVENUE
PH 840
CORAL GABLES, FL 33146 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: CABALCETA VARA, HERNAN
Address: 1 GROVE ISLE DRIVE APT#308A
City-St-Zip: MIAMI, FL 33133

Title: MGRM
Name: CABALCETA FERNANDEZ, ALDO
Address: 1 GROVE ISLE DRIVE APT#308A
City-St-Zip: MIAMI, FL 33133

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: HERNAN CABALCETA VARA MGRM 04/10/2012

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