

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000104779

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Entity Name:** EQUIFORMA, LLC

**Current Principal Place of Business:**

3600 MYSTIC POINTE DRIVE  
LP-6  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

3600 MYSTIC POINTE DRIVE  
LP-6  
AVENTURA, FL 33180 US

**New Mailing Address:**

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

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

BRIER, ADRIANA  
3600 MYSTIC POINTE DRIVE  
LP-6  
AVENTURA, FL 33180 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:                      RAFAEL, PARRA E  
Address:                      13670 ABBEY DRIVE, F-2  
City-St-Zip:                      FORT MYERS, FL 33919

Title:                      MGRM  
Name:                      MARIA, FOREROR V  
Address:                      13670 ABBEY DRIVE, F-2  
City-St-Zip:                      FORT MYERS, FL 33919

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: MARIA V. FORERO

MGRM

03/08/2010

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