

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000109169

FILED
Mar 09, 2010
Secretary of State

Entity Name: FAUSTO AT PORT DE MER, LLC.

Current Principal Place of Business:

1800 SW FIRST AVENUE
406
MIAMI, FL 33129 US

New Principal Place of Business:

Current Mailing Address:

1800 SW FIRST AVENUE
406
MIAMI, FL 33129 US

New Mailing Address:

FEI Number: 01-0935090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, MARLENE
1800 SW FIRST AVENUE
406
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

HERNANDEZ, MARLENE C
1800 SW FIRST AVENUE
406
MIAMI, FL 33129 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: MARLENE C HERNANDEZ

03/09/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MARQUEZ, NANCY
Address: 1800 SW FIRST AVENUE - SUITE 406
City-St-Zip: MIAMI, FL 33129 US

Title: MGRM
Name: MARQUEZ-MOLINA, KAREN
Address: 1800 SW FIRST AVENUE - SUITE 406
City-St-Zip: MIAMI, FL 33129 US

Title: MGRM
Name: MOLINA, RAUL G JR.
Address: 1800 SW FIRST AVENUE - SUITE 406
City-St-Zip: MIAMI, FL 33129 US

Title: P
Name: MARQUEZ, NANCY
Address: 1800 SW FIRST AVENUE - SUITE 406
City-St-Zip: MIAMI, FL 33129 US

Title: VPS
Name: MARQUEZ-MOLINA, KAREN
Address: 1800 SW FIRST AVENUE - SUITE 406
City-St-Zip: MIAMI, FL 33129 US

Title: T
Name: HERNANDEZ, MARLENE C
Address: 1800 SW FIRST AVENUE - SUITE 406
City-St-Zip: MIAMI, FL 33129 US

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: MARLENE C HERNANDEZ

VP

03/09/2010

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