

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000122168

Entity Name: MIGUEL J. CASTRO, LLC

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

6280 NW 186 ST.  
SUITE #115  
HIALEAH, FL 33015

## **New Principal Place of Business:**

6790 NW 186 ST.  
SUITE #501  
HIALEAH, FL 33015

## **Current Mailing Address:**

PO BOX 170527  
MIAMI, FL 33017

## **New Mailing Address:**

6790 NW 186 ST.  
SUITE #501  
HIALEAH, FL 33015

FEI Number: 27-1546832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASTRO, MIGUEL J  
6280 NW 186 ST.  
SUITE #115  
HIALEAH, FL 33015 US

## **Name and Address of New Registered Agent:**

CASTRO, MIGUEL J  
6790 NW 186 ST.  
SUITE #501  
HIALEAH, FL 33015 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: MIGUEL J. CASTRO

04/30/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CASTRO, MIGUEL J  
Address: 6790 NW 186 ST. #501  
City-St-Zip: MIAMI, FL 33015

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: MIGUEL J. CASTRO

MGRM

04/30/2011

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