

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000108601

Entity Name: ANCALYBARI, LLC

FILED
Apr 16, 2012
Secretary of State

Current Principal Place of Business:

485 BRICKELL AVENUE
UNIT 3711
MIAMI, FL 33131

New Principal Place of Business:

485 BRICKELL AVENUE
APT 3711
MIAMI, FL 33131

Current Mailing Address:

C/O PIQUET LAW FIRM, P.A., PIQUET LAW FIRM
801 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131

New Mailing Address:

C/O PIQUET LAW FIRM, P.A., PIQUET LAW FIRM
801 BRICKELL AVENUE, SUITE 1610
MIAMI, FL 33131

FEI Number: 41-2281096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: MGR
Name: SCHILLING MINUZZI, ANTONIO C
Address: 485 BRICKELL AVENUE, UNIT 3711
City-St-Zip: MIAMI, FL 33131

Title: MGR
Name: MINUZZI, LYANE K
Address: 485 BRICKELL AVENUE, UNIT 3711
City-St-Zip: MIAMI, FL 33131

Title: MGR
Name: MINUZZI, BARBARA K
Address: 485 BRICKELL AVENUE, UNIT 3711
City-St-Zip: MIAMI, FL 33131

Title: MGR
Name: MINUZZI, RICARDO K
Address: 485 BRICKELL AVENUE, UNIT 3711
City-St-Zip: MIAMI, FL 33131

Title: MGR
Name: MINUZZI FILHO, ANTONIO CARLOS S
Address: 485 BRICKELL AVENUE, UNIT 3711
City-St-Zip: MIAMI, FL 33131

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: ANTONIO MINUZZI

MGR

04/16/2012

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