

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000001719

Entity Name: PRO PROPERTY LLC

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2760 N. UNIVERSITY DR.  
DAVIE, FL 33024 UN

**New Principal Place of Business:**

2760 N. UNIVERSITY DR.  
DAVIE, FL 33024 US

**Current Mailing Address:**

2760 N. UNIVERSITY DR.  
DAVIE, FL 33024

**New Mailing Address:**

2760 N. UNIVERSITY DR.  
DAVIE, FL 33024 US

FEI Number: 65-1074022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ZORRILLA, JUAN  
2 ALHAMBRA PLAZA  
801  
CORAL GABLES, FL 33134 US

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

SARA LAHR VINAS PA  
2760 N UNIVERSITY DR.  
DAVIE, FL 33328 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: S L VINAS

04/18/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: VINAS, HECTOR R MGR  
Address: 2760 N. UNIVERSITY DR.  
City-St-Zip: DAVIE, FL 33024

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: H R VINAS

MGR

04/18/2012

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