

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000010689

**FILED**  
**Jun 08, 2012**  
**Secretary of State**

**Entity Name:** GARRAPOSA MANAGEMENT LLC

**Current Principal Place of Business:**

1055 N.W. 159TH DRIVE  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

1055 N.W. 159TH DRIVE  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

**FEI Number:** 30-0667413

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PINEL, PHILIPPE  
1055 N.W. 159TH DRIVE  
MIAMI GARDENS, FL 33169 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: MGRP  
Name: PALACIOS, JAIME  
Address: 1055 N.W. 159TH DRIVE  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VP/S  
Name: MONREAL, FERNANDO CID  
Address: 1055 N.W. 159TH DRIVE  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VP  
Name: PALACIOS, JAVIER  
Address: 1055 N.W. 159TH DRIVE  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VP  
Name: PINEL, PHILIPPEE  
Address: 1055 N.W. 159TH DRIVE  
City-St-Zip: MIAMI GARDENS, FL 33169

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: JAMIE PALACIOS

MGRP

06/08/2012

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