

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000008393

**Entity Name:** TRANSPREMIER, L.L.C.

**Current Principal Place of Business:**

9388 SIDNEY HAYES ROAD  
ORLANDO, FL 32824

**Current Mailing Address:**

9388 SIDNEY HAYES ROAD  
ORLANDO, FL 32824 US

**FEI Number: 65-1024796**

**Certificate of Status Desired: Yes**

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

GUARNIZO, SERGIO MANAGER  
6485 OLD CARRIAGE RD  
WINTER GARDEN, FL 34787 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GUARNIZO, SERGIO A  
Address 315 TRUMAN ST NE  
City-State-Zip: ALBUQUERQUE NM 87108

Title P  
Name GUARNIZO, SERGIO A  
Address 315 TRUMAN ST NE  
City-State-Zip: ALBUQUERQUE NM 87108

Title 1 VP  
Name BERNATE-MAZO, DIANA R  
Address 315 TRUMAN ST NE  
City-State-Zip: ALBUQUERQUE NM 87108

Title 2 VP  
Name VELANDIA, JULIANA  
Address 12433 BLACKSMITH DR. APT. 302  
City-State-Zip: ORLANDO FL 32837

Title 3 VP  
Name GOMEZ, JUAN CARLOS  
Address 8238 FORT THOMAS WAY  
City-State-Zip: ORLANDO FL 32822

Title MGRM  
Name BERNATE-MAZO, DIANA R  
Address 315 TRUMAN ST N.E.R RD.  
City-State-Zip: ALBURQUERQUE NM 87108

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SERGIO GUARNIZO**

**MG/PRESIDENT**

**02/04/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date