## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051359

Entity Name: CARIBE CENTRAL LLC

**Current Principal Place of Business:** 

1500 SAN REMO AVENUE SUITE 290

CORAL GABLES, FL 33146

**Current Mailing Address:** 

1500 SAN REMO AVENUE SUITE 290

CORAL GABLES, FL 33146

FEI Number: 20-0487026 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, CARLOS E 1500 SAN REMO AVENUE SUITE 290

CORAL GABLES, FL 33146 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

FILED Jan 23, 2013

**Secretary of State** 

CC7039308195

Authorized Person(s) Detail:

Title P Title VF

Name MARTINEZ, CARLOS E Name MARTINEZ, FERNANDO I

Address 1500 SAN REMO AVENUE, SUITE 290 Address 1500 SAN REMO AVENUE, SUITE 290

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title VP Title VP

Name MARTINEZ, RAUL A Name MARTINEZ, EMILIO J

Address 1500 SAN REMO AVENUE, SUITE 290 Address 1500 SAN REMO AVENUE, SUITE 290

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title S

Name ARNAIZ, MIREN

Address 1500 SAN REMO AVENUE, SUITE 290

City-State-Zip: CORAL GABLES FL 33146

S

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.