

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065150

Entity Name: HARBEL, L.L.C.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134

Current Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134

FEI Number: 20-5369210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC
2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 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 AKERMAN, HENRY
Address CALLE 88 NO. 6-52, APT. 803
City-State-Zip: BOGOTA, COLOMBIA XX XX

Title MGRM
Name HIMELFARB, BELA
Address CALLE 88 NO. 6-52, APT. 803
City-State-Zip: BOGOTA, COLOMBIA XX XX

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HENRY AKERMAN

MGRM

04/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date