## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104915

**Entity Name: INTERAMERICAN CORPORATE SERVICES LLC** 

FILED Feb 10, 2014 Secretary of State CC9365225767

## **Current Principal Place of Business:**

2525 PONCE DE LEON BLVD.

**SUITE 1225** 

CORAL GABLES, FL 33134

## **Current Mailing Address:**

2525 PONCE DE LEON BLVD. SUITE 1225 CORAL GABLES, FL 33134 US

FEI Number: 38-3885753 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HERNANDEZ, PATRICIA M 2525 PONCE DE LEON BLVD. SUITE 1225 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:

1225

Title MGR Title MGR

Name HERNANDEZ, PATRICIA M Name AVILA, ALCIDES I

Address 2525 PONCE DE LEON BLVD., SUITE Address 2525 PONCE DE LEON BLVD., SUITE

1225

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title MGR

Name FERRI, MARCO Name BARRETO TERCILLA, MAGGIE

Address 2525 PONCE DE LEON BLVD., SUITE Address 2525 PONCE DE LEON BLVD., SUITE

5 1225

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR Title MGR

Name GARRO, ASNARDO Name MENA, DANIEL O

Address 2525 PONCE DE LEON BLVD., SUITE Address 2525 PONCE DE LEON BLVD., SUITE

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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.