

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012106

Entity Name: 100% CAPRI, LLC

Current Principal Place of Business:

9700 COLLINS AVE
#218
BAL HARBOUR, FL 33154

Current Mailing Address:

4000 PONCE DE LEON BLVD. SUITE 470
CORAL GABLES, FL 33146

FEI Number: 75-3267185

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVAS, BRENDA
4000 PONCE DE LEON BLVD., SUITE 470
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

Authorized Person(s) Detail :

Title PVS
Name AIELLO, ANTONINO
Address 9700 COLLINS AVE., SUITE 218
City-State-Zip: MIAMI FL 33154

Title T
Name PAPENDIECK, SUNNIVA JOCELY
Address 9700 COLLINS AVE., SUITE 218
City-State-Zip: MIAMI FL 33154

Title MGR
Name OLIVAS, BRENDA
Address 4000 PONCE DE LEON BLVD., SUITE
470
City-State-Zip: CORAL GABLES FL 33146

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: BRENDA OLIVAS

MANAGER

02/21/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date