

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000023254

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC0557981968**

**Entity Name:** NE 1ST TERRACE LAND INVESTMENTS, LLC

**Current Principal Place of Business:**

18001 OLD CUTLER RD 370  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

18001 OLD CUTLER RD 370  
PALMETTO BAY, FL 33157

**FEI Number:** 26-2111577

**Certificate of Status Desired:** No

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

GARCIA-PEDROSA, JOSE  
18001 OLD CUTLER ROAD  
SUITE # 370  
PALMETTO BAY, FL 33157 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 MGR  
Name BARED, JOSE I  
Address 18001 OLD CUTLER RD 370  
City-State-Zip: PALMETTO BAY FL 33157

Title MGR  
Name GARRIGO, IVETTE  
Address 18001 OLD CUTLER RD 370  
City-State-Zip: PALMETTO BAY FL 33157

Title MGR  
Name BARED, CARLOS E  
Address 18001 OLD CUTLER RD 370  
City-State-Zip: PALMETTO BAY FL 33157

Title MGR  
Name BARED, MAURICE  
Address 18001 OLD CUTLER RD 370  
City-State-Zip: PALMETTO BAY FL 33157

Title MGR  
Name MOLINA, PATRICIA  
Address 18001 OLD CUTLER RD 370  
City-State-Zip: PALMETTO BAY FL 33157

*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:** CARLOS BARED

**MGR**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date