

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000032335

**Entity Name:** SEGABAL, LLC

**Current Principal Place of Business:**

9700 COLLINS AVE. # 239  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

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

**FEI Number:** 26-2301251

**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 SEGABAL SILVER, LLC  
Address 2121 PONCE DE LEON BLVD. #1050  
City-State-Zip: CORAL GABLES FL 33134

Title MGRM  
Name DIBA, LLC  
Address 10350 W. BAY HARBOR DR., UNIT 3-G  
City-State-Zip: BAY HARBOR ISLAND FL 33154

*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:** SEGABAL SILVER, LLC

**MBR**

**04/04/2013**

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

\_\_\_\_\_  
Date