

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114798

Entity Name: MR. POLLO LLC**Current Principal Place of Business:**3456 RED RD
MIRAMAR, FL 33025**Current Mailing Address:**3456 RED RD
MIRAMAR, FL 33025 US**FEI Number:** 26-3907176**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAMADRID FINANCIAL SERVICES CORP
1267 S PINE ISLAND RD
PLANTATION, FL 33324 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	PEREZ, LILIAN
Address	6041 SW 19 ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	MGRM
Name	RUIZ, SANDRA C
Address	6041 SW 19 ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	MGRM
Name	MURIEL, JUAN P
Address	6041 SW 19 ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	MGRM
Name	PEREZ, RODRIGO
Address	6041 SW 19 ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	MGRM
Name	HERRERA, ANA M
Address	6041 SW 19 ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

Title	MGRM
Name	CARDENAS, ARMANDO
Address	6041 SW 19 ST
City-State-Zip:	NORTH LAUDERDALE FL 33068

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: PEREZ LILIAN

MGR

04/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date