

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000024489

**Entity Name:** FLIXAR, LLC**Current Principal Place of Business:**2708 NW 72 AVENUE  
MIAMI, FL 33122**Current Mailing Address:**7660 S.W. 83RD COURT  
MIAMI, FL 33143**FEI Number:** 46-0522035**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CZETYRKO, CLAUDIA  
7660 S.W. 83RD COURT  
MIAMI, FL 33143 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	SAID, HERNAN A
Address	8750 NW 36 ST SUITE 240
City-State-Zip:	DORAL FL 33178

Title	MGRM
Name	DIAZ, MAURICIO A
Address	8750 NW 36 STREET SUITE 240
City-State-Zip:	DORAL FL 33178

Title	MGRM
Name	ALVARADO, JAVIER
Address	8750 NW 36 ST SUITE 240
City-State-Zip:	DORAL FL 33178

Title	MGRM
Name	LONGHITANO, CHRISTIAN F
Address	8750 NW 36 STREET SUITE 240
City-State-Zip:	DORAL FL 33178

*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:** MAURICIO A DIAZ

MGRM

04/23/2014

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