

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000035525

**Entity Name:** CONTRERAS CASARIN, L.L.C.

**Current Principal Place of Business:**

6000 ISLAND BOULEVARD  
2106  
AVENTURA, FL 33160

**Current Mailing Address:**

6000 ISLAND BOULEVARD  
2106  
AVENTURA, FL 33160

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BRIER, ADRIANA  
3600 MYSTIC POINTE DRIVE  
LP-6  
AVENTURA, FL 33180 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 CONTRERAS, JOSE RSR.  
Address 6000 ISLAND BOULEVARD, APT. 2106  
City-State-Zip: AVENTURA FL 33160

Title MGRM  
Name CASARIN, MARIA L  
Address 6000 ISLAND BOULEVARD, APT. 2106  
City-State-Zip: AVENTURA FL 33160

Title MGRM  
Name CONTRERAS, MARIA I  
Address 6000 ISLAND BOULEVARD, APT. 2106  
City-State-Zip: AVENTURA FL 33160

Title MGRM  
Name CONTRERAS, JOSE RJR.  
Address 6000 ISLAND BOULEVARD, APT. 2106  
City-State-Zip: AVENTURA FL 33160

Title MGRM  
Name CONTRERAS, MAURICIO E  
Address 6000 ISLAND BOULEVARD, APT. 2106  
City-State-Zip: AVENTURA FL 33160

*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:** JOSE R. CONTRERAS

**MGRM**

**04/30/2013**

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

\_\_\_\_\_  
Date