

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000062101

Entity Name: AGROMACHINERY LLC**Current Principal Place of Business:**5150 NW 72 AVE
MIAMI, FL 33166**Current Mailing Address:**5150 NW 72 AVE
MIAMI, FL 33166**FEI Number:** APPLIED FOR**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CONCHA, ZONIA
275 SW 198 TERR
PEMBROKE PINES, FL 33029 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	TORREALBA, ALI
Address	5150 NW 72 AVE
City-State-Zip:	MIAMI FL 33166

Title	MGR
Name	TORREALBA, ALI JR
Address	5150 NW 72 AVE
City-State-Zip:	MIAMI FL 33166

Title	MGR
Name	TORREALBA, ALTHIS
Address	5150 NW 72 AVE
City-State-Zip:	MIAMI FL 33166

Title	MGR
Name	TORREALBA, THISBETH
Address	5150 NW 72 AVE
City-State-Zip:	MIAMI FL 33166

Title	MGR
Name	BASTARDO, THISBET
Address	5150 NW 72 AVE
City-State-Zip:	MIAMI FL 33166

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: ALI TORREALBA

MANAGER

03/30/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date