

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000110994

**Entity Name:** S.A. 2028 A.G. LLC

**Current Principal Place of Business:**

16699 COLLINS AVENUE  
SUITE 4106  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

16699 COLLINS AVENUE  
SUITE 4106  
SUNNY ISLES, FL 33160 US

**FEI Number:** 33-1222236

**Certificate of Status Desired:** No

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

BELOFF PARKER JACOBS, PLC  
1691 MICHIGAN AVE.  
SUITE 320  
MIAMI BEACH, FL 33140 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 APOLO TINOCO, SERGIO ALBERTO  
Address 16699 COLLINS AVENUE  
SUITE 4106  
City-State-Zip: SUNNY ISLES FL 33160

Title MGRM  
Name ANA FABIOLA DE LAS MERCEDES  
GRIJALVA GARCIA  
Address 16699 COLLINS AVENUE  
SUITE 4106  
City-State-Zip: SUNNY ISLES FL 33160

Title MGRM  
Name APOLO, STEPHANIE M  
Address 16699 COLLINS AVENUE  
SUITE 4106  
City-State-Zip: SUNNY ISLES FL 33160

Title MGRM  
Name APOLO, ANABELLE A  
Address 16699 COLLINS AVENUE  
SUITE 4106  
City-State-Zip: SUNNY ISLES 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANA FABIOLA DE LAS MERCEDES GRIJALVA  
GARCIA

MGRM

04/14/2016

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

\_\_\_\_\_  
Date