

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000027961

**Entity Name:** PURE BASKETBALL, LLC

**Current Principal Place of Business:**

2520 NW 97 AVE  
210  
DORAL, FL 33172

**Current Mailing Address:**

2520 NW 97 AVE  
210  
DORAL, FL 33172

**FEI Number:** 45-4638486

**Certificate of Status Desired:** No

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

FERNANDEZ, GABRIEL  
2520 NW 97 AVE  
210  
DORAL, FL 33172 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 FERNANDEZ, GABRIEL  
Address 9380 SW 35 ST  
City-State-Zip: MIAMI FL 33165

Title MGRM  
Name FERNANDEZ, CHRISTINA  
Address 9380 SW 35 ST  
City-State-Zip: MIAMI FL 33165

*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:** GABRIEL FERNANDEZ

**MANAGER**

**03/08/2013**

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

\_\_\_\_\_  
Date