

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000148568

**Entity Name:** CONSULETA'S, LLC

**Current Principal Place of Business:**

90 SW 3RD ST  
CU 5  
MIAMI, FL 33130

**Current Mailing Address:**

90 SW 3RD ST  
CU 5  
MIAMI, FL 33130

**FEI Number:** 37-1707681

**Certificate of Status Desired:** No

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

MENDEZ, ALICIA B  
90 SW 3RD ST  
CU 5  
MIAMI, FL 33130 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 GARCIA, HORACIO G  
Address 90 SW 3 ST  
CU-5  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name GARCIA, FLORENCIA V  
Address 90 SW 3 ST, CU-5  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name GARCIA, MICAELA  
Address 90 SW 3RD ST CU 5  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name GARCIA, FACUNDO  
Address 90 SW 3RD ST CU 5  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name GARCIA, CONSUELO  
Address 90 SW 3RD ST CU 5  
City-State-Zip: MIAMI FL 33130

*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:** GARCIA , HORACIO G

**MGRM**

**04/30/2013**

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