

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000112947

Entity Name: ALMAR OCEAN ALL, LLC**Current Principal Place of Business:**5134 NW 94TH DORAL PLACE
DORAL, FL 33178**Current Mailing Address:**5134 NW DORAL PLACE
DORAL, FL 33178**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PERAZA, JUDY
9100 S. DADELAND BOULEVARD
514
MIAMI, FL 33156 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	ALDECOA, ALFONSO
Address	5134 NW 94TH DORAL PLACE
City-State-Zip:	DORAL FL 33178

Title	MGRM
Name	ALDECOA, MARLENE
Address	5134 NW 94TH DORAL PLACE
City-State-Zip:	DORAL FL 33178

Title	MGRM
Name	ALDECOA, ALAITZ
Address	5134 NW 94TH DORAL PLACE
City-State-Zip:	DORAL FL 33178

Title	MGRM
Name	ALDECOA, ALAIKARI
Address	5134 NW 94TH DORAL PLACE
City-State-Zip:	DORAL FL 33178

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: ALFONSO ALDECOA**MANAGER****01/13/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date