

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025821

Entity Name: 95 AVENUE, LLC

FILED
Jun 30, 2011
Secretary of State

Current Principal Place of Business:

901 PONCE DE LEON BLVD., SUITE 603
CORAL GABLES, FL 33134

New Principal Place of Business:

801 BRICKELL KEY BLVD.
APT # 404
MIAMI, FL 33130

Current Mailing Address:

901 PONCE DE LEON BLVD., SUITE 603
CORAL GABLES, FL 33134

New Mailing Address:

801 BRICKELL KEY BLVD.
APT # 404
MIAMI, FL 33130

FEI Number: 74-3066145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBORNOZ, WILLIAM H
901 PONCE DE LEON BLVD
SUITE 603
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BARBARA BURKE

06/30/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: AZCARATE, CARLOS F
Address: 801 BRICKELL KEY BLVD. APT# 404
City-St-Zip: MIAMI, FL 33130

Title: MGR
Name: EDUARDO, RESTREPO
Address: 801 BRICKELL KEY BLVD. APT# 404
City-St-Zip: MIAMI, FL 33130

Title: MGR
Name: PEDROZA, CARLOS
Address: 801 BRICKELL KEY BLVD. APT# 404
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information indicated on this 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.

SIGNATURE: /CARLOS F. AZCARATE/

MGR

06/30/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date