

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000033241

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** VILDOSOLA, CADENAS & ASSOCIATES, P.L.

**Current Principal Place of Business:**

8725 NW 18TH TERRACE, SUITE -202  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

8725 NW 18TH TERRACE, SUITE 202  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 65-1164871

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VILDOSOLA, FRANK  
8725 NW 18 TERR.  
202  
DORAL, FL 33172 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** FRANK VILDOSOLA, CPA, P.A.  
**Address:** 2319 NW 187TH AVENUE  
**City-St-Zip:** PEMBROKE PINES, FL 33029

**Title:** MGR  
**Name:** ERNESTO DE LA HOZ CPA PA  
**Address:** 430 WEST 56TH STREET  
**City-St-Zip:** HIALEAH, FL 33012

**Title:** MGR  
**Name:** EDUARDO CADENAS, CPA, P.A.  
**Address:** 8725 NW 18TH TERRACE SUITE 202  
**City-St-Zip:** MIAMI, FL 33172

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:** FRANK VILDOSOLA

MEMB

04/26/2011

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