

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000033772

**FILED**  
**Jun 13, 2011**  
**Secretary of State**

**Entity Name:** CAZEAU, LINTON BARNES, LLC

**Current Principal Place of Business:**

633 NE 167 ST.  
SUITE 1025  
NORTH MIAMI BEACH, FL 33162 US

**New Principal Place of Business:**

**Current Mailing Address:**

633 NE 167 ST.  
SUITE 1025  
NORTH MIAMI BEACH, FL 33162 US

**New Mailing Address:**

**FEI Number:** 47-0899296

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAZEAU, BEATRICE  
633 N.E. 167TH STREET  
1025  
NORTH MIAMI BEACH, FL 33162 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:** MGRM  
**Name:** CAZEAU, BEATRICE  
**Address:** 2801 NE 183RD STREET, 1506 W  
**City-St-Zip:** AVENTURA, FL 33160

**Title:** MGRM  
**Name:** LINTON ROBINSON, CHERYL D  
**Address:** PO BOX 640194  
**City-St-Zip:** MIAMI, FL 33162

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:** BEATRICE CAZEAU

MGRM

06/13/2011

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