

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**May 01, 2006 08:
Secretary of S**

DOCUMENT # L03000047062

1. Entity Name
STANLORD LLC



Principal Place of Business
**CALLE GALICIA 1154, 1302
MONTEVIDEO, URUGUAY,**

Mailing Address
**200 S BISCAYNE BLVD, 43RD FLOOR
MIAMI, FL 33131**



04242006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0592901

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PENINSULA REGISTERED AGENTS, INC.
200 S BISCAYNE BLVD, 43RD FLOOR
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
STANLORD, S/A
CALLE GALICIA 1154
MONTEVIDEO, URUGUAY, 1302**

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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U000000551371
05/13/06-80097-012 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

BY
STANLORD S A
SIGNATURE: **TABARÉ ORTIZ GIBERT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date **04-24-06**

Daytime Phone #

(05982)4094661

VICE PRESIDENT