

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90064 034 \*\*\*\*50.00

**DOCUMENT # L04000036915**

1. Entity Name  
CENTRUST INVESTMENTS, LLC



Principal Place of Business  
4011 W. FLAGLER STREET  
SUITE 404  
MIAMI, FL 33134

Mailing Address  
4011 W. FLAGLER STREET  
SUITE 404  
MIAMI, FL 33134

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2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02162006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
90-0174257

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HATTON, DAVID L  
150 ALHAMBRA CIRCLE  
SUITE 1150  
CORAL GABLES, FL 33134

Name  
Rolando Velasco

Street Address (P.O. Box Number is Not Acceptable)  
2030 Douglas Road Suite 105

City Coral Gables, FL Zip Code 33134

8. The above named entry 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**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete  
NAME VELASCO, ROLAND  
STREET ADDRESS 4011 W. FLAGLER STREET, SUITE 404  
CITY-ST-ZIP MIAMI, FL 33134

TITLE President ☐ Change ☒ Addition  
NAME Rolando Velasco  
STREET ADDRESS 4011 W Flagler Street Suite 404  
CITY-ST-ZIP Miami, FL 33134

TITLE MGR ☐ Delete  
NAME VELASCO, MIRIAM E  
STREET ADDRESS 4011 W. FLAGLER STREET, SUITE 404  
CITY-ST-ZIP MIAMI, FL 33134

TITLE Vice-President ☐ Change ☒ Addition  
NAME Kristy Velasco  
STREET ADDRESS 4011 W Flagler Street Suite 404  
CITY-ST-ZIP Miami, FL 33134

TITLE MGR ☐ Delete  
NAME VELASCO, KRISTY  
STREET ADDRESS 4011 W. FLAGLER STREET, SUITE 404  
CITY-ST-ZIP MIAMI, FL 33134

TITLE Secretary/Treasurer ☐ Change ☒ Addition  
NAME miriam velasco-Esquivel  
STREET ADDRESS 4011 W Flagler Street Suite 404  
CITY-ST-ZIP Miami, FL 33134

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

**SIGNATURE:**

*Rolando Velasco*

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

Date

Daytime Phone #