

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071436

Entity Name: ALAUSA, LLC

FILED  
Sep 02, 2009  
Secretary of State

## Current Principal Place of Business:

920 EUCLID AVE  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

920 EUCLID AVENUE  
MIAMI BEACH, FL 33137

## Current Mailing Address:

410 MERIDIAN AVE  
FL.2  
MIAMI BEACH, FL 33139

## New Mailing Address:

475 NE 50TH TERRACE  
MIAMI, FL 33137

FEI Number: 34-2022170      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

TARACIDO, NELSON  
5825 SUNSET DRIVE, SUITE 210  
SOUTH MIAMI, FL 33143      US

## Name and Address of New Registered Agent:

LEWIS, M. KAY ESQ.  
C/O LEWIS LAW OFFICE, P.A.  
475 NE 50TH TERRACE  
MIAMI, FL 33137      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: M. KAY LEWIS, ESQ.

09/02/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete  
Name: CRISTIANO, MARINARI MGRM  
Address: 410 MERIDIAN AVE , FL.2  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete  
Name: ANDREA, MODENESI MGRM  
Address: VIA DON STURZO # 7  
City-St-Zip: GREZZAGO, MI 20056 IT

Title: MGRM ( ) Delete  
Name: MODENESI, LUIGINO MGRM  
Address: VIA DON STURZO # 7  
City-St-Zip: GREZZAGO, MI 20056 IT

Title: MGRM ( ) Delete  
Name: COMI, ANTONIA MGRM  
Address: VIA DON STURZO # 7  
City-St-Zip: GREZZAGO, MI 20056 IT

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANDREA MODENESI

MGR

09/02/2009

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