

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000074465

**FILED**  
**Feb 11, 2012**  
**Secretary of State**

**Entity Name:** FARMACIA JULIA DISCOUNT #2, LLC

**Current Principal Place of Business:**

3197 SW 18 STREET  
MIAMI, FL 33145

**New Principal Place of Business:**

3197 SW 18 STREET  
MIAMI, FL 33145 UN

**Current Mailing Address:**

3197 SW 18 STREET  
MIAMI, FL 33145

**New Mailing Address:**

**FEI Number:** 86-1117972      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

NEGRINA, ALEJANDRO MGR  
3197 SW 18 ST  
MIAMI, FL 33145 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:** NEGRIN, ALEJANDRO  
**Address:** 3197 SW 18 STREET  
**City-St-Zip:** MIAMI, FL 33145

**Title:** MGR  
**Name:** SANCHEZ, DAYSI M  
**Address:** 3197 SW 18 STREET  
**City-St-Zip:** MIAMI, FL 33145

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: ALEJANDRO NEGRIN

MR

02/11/2012

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