

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000085304

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** BRAVO KEY BISCAYNE, LLC

**Current Principal Place of Business:**

220 WEST TROPICAL WAY  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

220 WEST TROPICAL WAY  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 20-2312875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHN, ALAN B  
100 W CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309 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:** FERNANDEZ-BRAVO, ALBERTO  
**Address:** 220 W TROPICAL WAY  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** MGRM  
**Name:** FERNANDEZ-BRAVO, TERESITA  
**Address:** 220 W TROPICAL WAY  
**City-St-Zip:** PLANTATION, FL 33317

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:** NANCY F. BRAVO

MGR

02/22/2011

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