

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 29, 2008 8:00 am**  
**Secretary of State**

05-29-2008 90013 010 \*\*\*138.75

**DOCUMENT # L05000003882**

1. Entity Name  
PROCOIN, LLC.



Principal Place of Business  
1725 MAIN STREET, SUITE 209  
WESTON, FL 33326

Mailing Address  
1725 MAIN STREET, SUITE 209  
WESTON, FL 33326

**50006241**

2. Principal Place of Business - No P.O. Box #  
597 Racquet Club RD

3. Mailing Address  
597 Racquet Club RD



Suite, Apt. #, etc.  
# 71

Suite, Apt. #, etc.  
# 71

05012008 Chg-LLC CR2E083 (12/06)

City & State  
Weston, FL

City & State  
Weston, FL

4. FEI Number  
20-2151847

Applied For  
Not Applicable

Zip  
33326

Country

Zip  
33326

Country

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

## 6. Name and Address of Current Registered Agent

ILEANA ARIAS TOVAR  
1725 MAIN STREET, SUITE 209  
WESTON TOWN CENTER  
WESTON, FL 33326

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

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

## 9. MANAGING MEMBERS/MANAGERS

## 10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME RAFAEL MACARIO, ANGEL  
STREET ADDRESS 1725 MAIN STREET, SUITE 209  
CITY-ST-ZIP WESTON, FL 33326

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

TITLE MGR ☐ Delete  
NAME MANUEL MACARIO, JUAN  
STREET ADDRESS 1725 MAIN STREET, SUITE 209  
CITY-ST-ZIP WESTON, FL 33326

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

TITLE MGRM ☐ Delete  
NAME GARCIA, FERNANDO  
STREET ADDRESS 1725 MAIN STREET, SUITE 209  
CITY-ST-ZIP WESTON, FL 33326

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

TITLE MGRM ☐ Delete  
NAME PAZ, FRANCISCO  
STREET ADDRESS 1725 MAIN STREET, SUITE 209  
CITY-ST-ZIP WESTON, FL 33326

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:**

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

Date

Daytime Phone #

*Maria S. [Signature]*

4/30/08 (305) 444-9929