

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000058363

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** INFANTE, ZUMPARNO, SALAZAR & MILOCH, LLC

**Current Principal Place of Business:**

500 SOUTH DIXIE HIGHWAY  
SUITE 302  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

500 SOUTH DIXIE HIGHWAY  
SUITE 302  
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number:** 20-3002976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INFANTE, EMIL R  
500 SOUTH DIXIE HIGHWAY  
SUITE 302  
CORAL GABLES, FL 33146 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: ZUMPARNO, CARLOS A  
Address: 1431 CORUNA AVENUE  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGRM  
Name: INFANTE, EMIL R  
Address: 1121 HARDEE ROAD  
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM  
Name: SALAZAR, LUIS  
Address: 500 S. DIXIE HWY, STE. 302  
City-St-Zip: CORAL GABLES, FL 33146

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: EMIL R. INFANTE

MGRM

04/26/2012

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