

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000065175

Entity Name: ALINA SEDANO, LLC

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6965 MAPLE TERRACE  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

7533 WEST TREASURE DRIVE  
NORTH BAY VILLAGE, FL 33141

**Current Mailing Address:**

6965 MAPLE TERRACE  
MIAMI LAKES, FL 33014

**New Mailing Address:**

7533 WEST TREASURE DRIVE  
NORTH BAY VILLAGE, FL 33141

FEI Number: 34-2050597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEDANO, ALINA  
6965 MAPLE TERRACE  
MIAMI LAKES, FL 33014 US

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

SEDANO, ALINA  
7533 WEST TREASURE DRIVE  
NORTH BAY VILLAGE, FL 33141 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/15/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SEDANO, ALINA  
Address: 6965 MAPLE TERRACE  
City-St-Zip: MIAMI LAKES, FL 33014

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: ALINA SEDANO

PRES

04/15/2011

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