

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000067199

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Entity Name:** A CORNER OF PARADISE LLC

**Current Principal Place of Business:**

7787 NEMEC DRIVE SOUTH  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

**Current Mailing Address:**

7787 NEMEC DRIVE SOUTH  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

FEI Number: 20-3113339      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ALEMAN, MARCOS  
7787 NEMEC DRIVE SOUTH  
WEST PALM BEACH, FL 33406      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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ALEMAN, MARCOS  
Address: 7787 NEMEC DRIVE SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: MGR  
Name: ALEMAN, MIREILLE  
Address: 7787 NEMEC DRIVE SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33406

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: MIREILLE ALEMAN

MGR

05/01/2010

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