# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Aug 07, 2006**
**Secretary of State**

DOCUMENT# L05000067250

**Entity Name:** ALTO INSURANCE SERVICES, LLC

**Current Principal Place of Business:**

5757 BLUE LAGOON DRIVE, SUITE 330
MIAMI, FL 33126

**New Principal Place of Business:**

7301 SW 57TH COURT
SUITE 450
SOUTH MIAMI, FL 33143

**Current Mailing Address:**

5757 BLUE LAGOON DRIVE, SUITE 330
MIAMI, FL 33126

**New Mailing Address:**

7301 SW 57TH COURT
SUITE 450
SOUTH MIAMI, FL 33143

**FEI Number: 20-3967308** **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:**

CFRA, LLC
CORPORATE CENTER THREE AT INTL PLAZA
4221 W. BOY SCOUT BOULEVARD, 10TH FLOOR
TAMPA, FL 336075736 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: MGR ( ) Delete
Name: ALTO MANAGEMENT SERV, ICES, LLC
Address: 5757 BLUE LAGOON DRIVE, SUITE 330
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition
Name: ALTO MANAGEMENT SERV, ICES, LLC
Address: 7301 SW 57TH COURT
City-St-Zip: SOUTH MIAMI, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: ALEXANDER SORIA PRES 08/07/2006

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