

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000068738

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** INNOVATION BUSINESS, LLC

**Current Principal Place of Business:**

3340 NE 190TH ST  
APT 605  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

3340 NE 190TH ST  
APT 605  
AVENTURA, FL 33180 US

**New Mailing Address:**

**FEI Number:** 20-3138901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAMADRID FINANCIAL SERV  
300 SOUTH PINES ISLAND ROAD  
STE 223  
PLANTATION, FL 33324 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:** AZCARATE, SONIA B  
**Address:** CALLE 92 #15-16 OF. 202  
**City-St-Zip:** BOGOTA, COLOMBIA, XX XX XX

**Title:** MGRM  
**Name:** BRAVO, JUAN C  
**Address:** CALLE 92 #15-16 OF. 202  
**City-St-Zip:** BOGOTA, COLOMBIA, XX XX XX

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:** JUAN CARLOS BRAVO

MNG

04/27/2012

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