

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000087815

**Entity Name:** LUCHA WORKSHOP LLC

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7735 S.W. 99 AVE.  
MIAMI, FL 33173 US

**New Principal Place of Business:**

**Current Mailing Address:**

7735 S.W. 99 AVE.  
MIAMI, FL 33173 US

**New Mailing Address:**

**FEI Number:** 59-3818657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELISGRAU, CHRISTINA MS.  
7735 S.W. 99 AVE.  
MIAMI, FL 33173 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:** RIVERA, RONNIE MR.  
**Address:** 7735 SW 99 AVE  
**City-St-Zip:** MIAMI, FL 33173 US

**Title:** MGRM  
**Name:** FELISGRAU, CHRISTINA MS.  
**Address:** 7735 S.W. 99 AVE.  
**City-St-Zip:** MIAMI, FL 33173 US

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:** CHRISTINA FELISGRAU

MGRM

02/15/2010

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