

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90429 042 *****50.00

DOCUMENT # L05000110514

1. Entity Name
MAPFRE RE, LLC



Principal Place of Business
18321 NE 19TH COURT
NORTH MIAMI BEACH, FL 33179

Mailing Address
18321 NE 19TH COURT
NORTH MIAMI BEACH, FL 33179

20011119



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02142006 Chg-LLC CR2E083 (11/05)

City & State

City & State

4. FEI Number
20-3796580

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ORDOÑEZ, TOMAS E
18321 N.W. 19TH COURT
NORTH MIAMI BEACH, FL 33179

7. Name and Address of New Registered Agent

Name
ORDOÑEZ, TOMAS E.

Street Address (P.O. Box Number is Not Acceptable)

18321 NE 19TH COURT

CITY NORTH MIAMI BEACH

FL

Zip Code
33179

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Tomas E. Oronoz
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/14/06
DATE

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ORDOÑEZ, TOMAS E. ☐ Delete
STREET ADDRESS 18321 N.W. 19TH COURT
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33179

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition
NAME ORDOÑEZ, TOMAS E.
STREET ADDRESS 18321 NE 19TH COURT
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33179

TITLE MGR ☐ Change ☒ Addition
NAME ALEXIS SANCHEZ
STREET ADDRESS 18321 NE 19TH COURT
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33179

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Tomas E. Oronoz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

02/14/06
Date

Daytime Phone #