

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000008092

Entity Name: APRI, LLC

FILED  
Feb 03, 2011  
Secretary of State

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD., STE. 1050  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2121 PONCE DE LEON BLVD., STE. 1050  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 20-4177343

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CONSULTING SERVICES OF SOUTH FLORIDA, INC  
2121 PONCE DE LEON BLVD., STE. 1050  
CORAL GABLES, FL 33134 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: PRIETO, COSME ANTONIO  
Address: CARRERAS 5,NO. 81-15 APTO. 801  
City-St-Zip: BOGOTA, XX COLOMBIA XX

Title: MGRM  
Name: ARIZA, MARIA TERESA  
Address: CARRERAS 5,NO. 81-15 APTO. 801  
City-St-Zip: BOGOTA, XX COLOMBIA 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: COSME ANTONIO PRIETO

MGRM

02/03/2011

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