

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000021503

**FILED**  
**Jan 14, 2009**  
**Secretary of State**

**Entity Name:** SQUARE 53, LLC

**Current Principal Place of Business:**

260 CRANDON BOULEVARD, SUITE 53  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

260 CRANDON BOULEVARD,  
SUITE #53  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

750 ALLENDALE RD  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 20-4435725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALVARO CASTILLO B., P.A.  
1390 BRICKELL AVENUE SUITE 200  
MIAMI, FL 33131 US

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

DANIEL GAVIRIA  
260 CRANDON BLVD  
SUITE # 53  
MIAMI, FL 33131 US

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: DANIEL GAVIRIA

01/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GAVIRIA, DANIEL  
Address: 260 CRANDON BOULEVARD, SUITE 53  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR ( ) Delete  
Name: LORENTE, ANASTASIO  
Address: 260 CRANDON BOULEVARD, SUITE 53  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL GAVIRIA

MGR

01/14/2009

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