

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000057530

Entity Name: A & H 901 G P, LLC

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

901 PONCE DE LEON BLVD  
SUITE #505  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

901 PONCE DE LEON BLVD  
SUITE #505  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 20-5009507

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALBORNOZ, WILLIAM H  
901 PONCE DE LEON BOULEVARD STE 603  
CORAL GABLES, FL 33134 US

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

SANCHEZ, ALEX  
901 PONCE DE LEON BOULEVARD STE 505  
CORAL GABLES, FL 33134 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: ALEX SANCHEZ

04/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ALBORNOZ, WILLIAM H  
Address: 901 PONCE DE LEON BOULEVARD STE 603  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR  
Name: HENAO, LUIS  
Address: 901 PONCE DE LEON BOULEVARD STE 505  
City-St-Zip: CORAL GABLES, FL 33134

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: LUIS HENAO

MGR

04/16/2012

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