

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000070359

**Entity Name:** LAS INFANTAS LLC

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1462 WEST 84 STREET  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5099  
HIALEAH, FL 33014

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAMPOS, BERNARDO  
1462 WEST 84 STREET  
HIALEAH, FL 33014 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: CAMPOS, BERNARDO  
Address: 1462 WEST 84 STREET  
City-St-Zip: HIALEAH, FL 33014

Title: MGRM  
Name: CAMPOS, SARA  
Address: 1462 WEST 84 STREET  
City-St-Zip: HIALEAH, FL 33014

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: BERNARDO CAMPOS

MGRM

04/09/2012

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