

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074800

Entity Name: INVERSIONES SANINO, LLC

FILED
May 13, 2009
Secretary of State

Current Principal Place of Business:

1200 BRICKELL AVE. SUITE 860
MIAMI, FL 33131

New Principal Place of Business:

1200 BRICKELL AVE.
860
MIAMI, FL 33131

Current Mailing Address:

1200 BRICKELL AVE. SUITE 860
MIAMI, FL 33131

New Mailing Address:

1200 BRICKELL AVE.
860
MIAMI, FL 33131

FEI Number: 26-2406290 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LOPEZ, PETER M ESQ
1911 NW 150 AVE., STE. 201
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

PETER M. LOPEZ, P.A.
1911 NW 150 AVE.
#201
PEMBROKE PINES, FL 33028 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: PETER M. LOPEZ

05/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RUSSO, SANTO
Address: 1200 BRICKELL AVE. SUITE 860
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: RUSSO, ANTONINO
Address: 1200 BRICKELL AVE. SUITE 860
City-St-Zip: MIAMI, FL 33131

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: SANTO RUSSO

MGR

05/13/2009

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