

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000084146

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** TRUST FINANCIAL SERVICES LLC

**Current Principal Place of Business:**

8020 CORAL WAY SUITE 5  
MIAMI, FL 33155

**New Principal Place of Business:**

1431 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134

**Current Mailing Address:**

8020 CORAL WAY SUITE 5  
MIAMI, FL 33155

**New Mailing Address:**

1431 PONCE DE LEON BLVD  
CORAL GABLES, FL 33134

**FEI Number:** 20-5447505

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LLORENTE, ORESTES  
8020 CORAL WAY SUITE 5  
MIAMI, FL 33155 US

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

LLORENTE, ORESTES  
1431 PONCE DE LEON BLVD  
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: ORESTES LLORENTE

01/04/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LLORENTE, ORESTES  
Address: 1431 PONCE DE LEON BLVD  
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: ORESTES LLORENTE

MGRM

01/04/2011

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