

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089980

Entity Name: MAFE INVESTMENTS, LLC

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

9830 SW 77TH AVE  
125  
MIAMI, FL 33156

## New Principal Place of Business:

## Current Mailing Address:

9830 SW 77TH AVE  
125  
MIAMI, FL 33156

## New Mailing Address:

FEI Number: 20-5543796      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:

CHAVES & ARMSTRONG, PA  
9830 SW 77TH AVE  
125  
MIAMI, FL 33156 US

## Name and Address of New Registered Agent:

CHAVES, MARK A  
9830 SW 77TH AVE  
125  
MIAMI, FL 33156 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: MARK A CHAVES

05/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: TORRECILLA, MARIA A  
Address: 9830 SW 77TH AVE STE 125  
City-St-Zip: MIAMI, FL 33156

Title: MGR ( ) Delete  
Name: BASTERRECHEA, ISABEL A  
Address: 9830 SW 77TH AVE STE 125  
City-St-Zip: MIAMI, FL 33156

Title: MGR ( ) Delete  
Name: BASTERRECHEA, IZASKUN  
Address: 9830 SW 77TH AVE STE 125  
City-St-Zip: MIAMI, FL 33156

## ADDITIONS/CHANGES:

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

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: MARK A CHAVES

RA

05/01/2009

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