

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112879

Entity Name: SAMORO, LLC

FILED  
Jan 28, 2008  
Secretary of State

**Current Principal Place of Business:**

104 CRANDON BLVD., SUITE 315  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 490315  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 20-8049512

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVE., SUITE 125  
CORAL GABLES, FL 33146 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: MGR ( ) Delete  
Name: OROZCO, GINETTE  
Address: 104 CRANDON BLVD., SUITE 315  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR (X) Delete  
Name: LIEVANO, ISABEL  
Address: 104 CRANDON BLVD., SUITE 315  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SANCHO, ALEJANDRO  
Address: 1110 BRICKELL AVENUE, SUITE 700  
City-St-Zip: MIAMI, FL 33131

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: ALEJANDRO SANCHO

MGR

01/28/2008

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