

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000115321

FILED
Mar 06, 2009
Secretary of State

Entity Name: UNIVISTA, LLC

Current Principal Place of Business:

3527 NE 2ND AVE
MIAMI, FL 33137

New Principal Place of Business:

8550 WEST FLAGLER STREET
103
MIAMI, FL 33144

Current Mailing Address:

3527 NE 2ND AVE
MIAMI, FL 33137

New Mailing Address:

8550 WEST FLAGLER STREET
103
MIAMI, FL 33144

FEI Number: 43-2114884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRENES, TAMARA
818 NE 92ND STREET
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

HERRERA, ANIA F
8550 WEST FLAGLER STREET
103
MIAMI, FL 33144 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: ANIA F. HERRERA

03/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRENES, TAMARA
Address: 818 NE 2ND AVE
City-St-Zip: MIAMI SHORES, FL 33138

Title: MGR () Delete
Name: BRENES, HORACIO M
Address: 11855 NE 19 DRIVE, APT 24
City-St-Zip: MIAMI, FL 33181

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HERRERA, ANIA F
Address: 8550 WEST FLAGLER STREET SUITE 103
City-St-Zip: MIAMI, FL 33144

Title: MGR (X) Change () Addition
Name: DIAZ, SUSANA
Address: 8550 WEST FLAGLER STREET SUITE 103
City-St-Zip: MIAMI, FL 33144

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: ANIA F. HERRERA

MGRM

03/06/2009

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