

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005377

FILED  
Feb 13, 2012  
Secretary of State

**Entity Name:** DIST. DE ALIMENTOS LATINOS, LLC

**Current Principal Place of Business:**

1375 N.W. 97TH AVENUE, UNIT 10  
DORAL, FL 33172

**New Principal Place of Business:**

1375 N.W. 97TH AVENUE  
10  
DORAL, FL 33172 UN

**Current Mailing Address:**

1375 N.W. 97TH AVENUE, UNIT 10  
DORAL, FL 33172

**New Mailing Address:**

1375 N.W. 97TH AVENUE  
10  
DORAL, FL 33172 UN

FEI Number: 22-3952093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSSIÈRE, LIDIA  
1375 N.W. 97TH AVENUE, UNIT 10  
DORAL, FL 33172 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  
Name: BELISARIO, HUMBERTO  
Address: 1375 N.W. 97TH AVENUE, UNIT 10  
City-St-Zip: DORAL, FL 33172

Title: MGR  
Name: BUSSIÈRE, LIDIA  
Address: 1375 N.W. 97TH AVENUE, UNIT 10  
City-St-Zip: DORAL, FL 33172

Title: S  
Name: BELISARIO, HUMBERTO  
Address: 1375 N.W. 97TH AVENUE, UNIT 10  
City-St-Zip: DORAL, FL 33172

Title: T  
Name: BUSSIÈRE, LIDIA  
Address: 1375 N.W. 97TH AVENUE, UNIT 10  
City-St-Zip: DORAL, FL 33172

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: HUMBERTO BELISARIO

S

02/13/2012

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