

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000034653

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Entity Name:** TIEDE, VALDES & COMPANY, LLC

**Current Principal Place of Business:**

1840 CORAL WAY  
# 4-413  
MIAMI, FL 33145

**New Principal Place of Business:**

6625 MIAMI LAKES DRIVE  
SUITE 426  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

PO BOX 4524  
MIAMI LAKES, FL 33014

**New Mailing Address:**

**FEI Number:** 20-8907171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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:** MGRM  
**Name:** TIEDE, KORNELIA  
**Address:** PO BOX 4524  
**City-St-Zip:** MIAMI LAKES, FL 33014

**Title:** MGRM  
**Name:** VALDES, RICARDO A  
**Address:** PO BOX 4524  
**City-St-Zip:** MIAMI LAKES, FL 33014

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:** RICARDO A. VALDÃ%S

MGRM

03/16/2012

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