

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000052683

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** FLORES FAMILY HOLDINGS, LLC

**Current Principal Place of Business:**

6705 RED ROAD UNIT 400  
CORAL GABLES, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

6705 RED ROAD UNIT 400  
CORAL GABLES, FL 33143

**New Mailing Address:**

FEI Number: 26-0614542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLORES, JAVIER  
6701 S MITCHELL MANOR CIR  
PINECREST, FL 33156 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: FLORES, JAVIER M.D.  
Address: 6705 RED ROAD UNIT 400  
City-St-Zip: CORAL GABLES, FL 33143

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: JAVIER FLORES

MGRM

04/27/2012

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