

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000056228

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Entity Name:** INVERSIONES BRAITOVEN, LLC

**Current Principal Place of Business:**

ONE VILLAGE PLACE  
4100 SALZEDO STREET, UNIT 16  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

354 SEVILLA AVENUE  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 26-2591776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FENTE, MANUEL E  
1110 BRICKELL AVENUE, SEVENTH FL  
MIAMI, FL 33131 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:** SALAZAR DE PENALOZA, CARMEN A  
**Address:** 4100 SALZEDO STREET, UNIT 16  
**City-St-Zip:** CORAL GABLES, FL 33146

**Title:** MGRM  
**Name:** COLINA, NELSON G  
**Address:** CALLE JUREL QUINTA LUCHI VERB PLAYA  
**City-St-Zip:** ESTADO NUEVA ESPATA VENEZUEL,

**Title:** MGRM  
**Name:** DE COLINA, IVETTE G  
**Address:** CALLE JUREL QUINTA LUCHI VERB PLAYA  
**City-St-Zip:** ESTADO NUEVA ESPATA VENEZUEL,

**Title:** MGRM  
**Name:** PENALOZA ARENAS, JUAN P  
**Address:** 41 SALZEDO STREET UNIT 16  
**City-St-Zip:** CORAL GABLES, FL 33134 US

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:** JUAN P PENALOZA

MGRM

03/05/2010

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