

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000110182

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** LATIN EXPLOSION MODELING & MANAGEMENT,LLC

**Current Principal Place of Business:**

365 ANCHOR RD  
1101  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

2234-1000 WINTER WOODS BLVD.  
WINTER PARK, FL 32792

**Current Mailing Address:**

PO BOX 1684  
GOLDENROD, FL 32733

**New Mailing Address:**

**FEI Number:** 26-1327910

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARAY, CARLOS  
365 ANCHOR RD  
1101  
CASSELBERRY, FL 32733 US

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

SANTIAGO, CARLOS  
2234-1000 WINTER WOODS BLVD.  
WINTER PARK, FL 32792 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: CARLOS SANTIAGO

04/12/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SANTIAGO, CARLOS  
Address: 2234-1000 WINTER WOODS BLVD.  
City-St-Zip: WINTER PARK, FL 32792

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: CARLOS SANTIAGO

MGRM

04/12/2010

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