

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000010513

FILED
Apr 26, 2012
Secretary of State

Entity Name: MALDERA & COLMENARES GROUP, LLC

Current Principal Place of Business:

201 S. BISCAYNE BLVD.
SUITE 905
MIAMI, FL 33131

New Principal Place of Business:

4100 SALZEDO STREET
6
CORAL GABLES, FL 33146

Current Mailing Address:

201 S. BISCAYNE BLVD.
SUITE 905
MIAMI, FL 33131

New Mailing Address:

4100 SALZEDO STREET
6
CORAL GABLES, FL 33146

FEI Number: 26-2457901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, LEONARDO A
201 S. BISCAYNE BLVD.
905
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MALDERA, FRANCESCO
4100 SALZEDO STREET
6
CORAL GABLES, FL 33146 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: FRANCESCO MALDERA

04/26/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MALDERA, FRANCESCO
Address: 4100 SALZEDO STREET, # 6
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR
Name: COLMENARES DE MALDER, BLANCA E
Address: 4100 SALZEDO STREET, # 6
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR
Name: MALDERA COLMENARES, GINO J
Address: 4100 SALZEDO STREET, # 6
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR
Name: MALDERA COLMENARES, MARIELA
Address: 4100 SALZEDO STREET, # 6
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR
Name: MALDERA COLMENARES, FABIOLA
Address: 4100 SALZEDO STREET, # 6
City-St-Zip: CORAL GABLES, FL 33146

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: FRANCESCO MALDERA

MGR

04/26/2012

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