FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 MAR 14 AM 9:06

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L08000018117

1. Entity Name
ASIA 27, LLC

Principal Place of Business	Mailing Address
% 1390 BRICKELL AVE STE 200 MIAMI, FL 33131	% 1390 BRICKELL AVE STE 200 MIAMI, FL 33131

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03152012 Chg-LLC CR2E083 (12/11)

4. FEI Number 06-1837482 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ALVARO CASTILLO B., P.A.
1390 BRICKELL AVE
STE 200
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2012 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR QUINTANA, RAUL % 1390 BRICKELL AVE - STE 200 MIAMI, FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CORTINA DE QUINTANA, ROSSANA % 1390 BRICKELL AVE - STE 200 MIAMI, FL 33131	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400224962244 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Raul Quintana 03/15/2012 carofran34@hotmail.com
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE DATE E-MAIL ADDRESS

MAR 16 2012

T. HAMPTON

Item #2

CORPORATION SERVICE COMPANY®

ACCOUNT NO. : I20000000195

REFERENCE : 130277 4328334

AUTHORIZATION Lynn Coleman

COST LIMIT : $ 138.75

ORDER DATE : March 14, 2012

ORDER TIME : 3:10 PM

ORDER NO. : 130277-010

CUSTOMER NO: 4328334

ANNUAL REPORT FILING

NAME: ASIA 27, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 14 AM 9:06

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap-EXT#2951

EXAMINER'S INITIALS: _____

MAR 16 2012

T. HAMPTON