

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000045704

**FILED**  
**Apr 16, 2011**  
**Secretary of State**

**Entity Name:** FORECLOSURE RESEARCH CENTER LLC

**Current Principal Place of Business:**

4472 SW 7TH ST.  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

7220 SW 12 ST  
MIAMI, FL 33144 US

**Current Mailing Address:**

4472 SW 7TH ST.  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

7220 SW 12 ST  
MIAMI, FL 33144 US

**FEI Number:** 26-2583184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VADELL, GUILLERMO  
4472 SW 7TH ST.  
CORAL GABLES, FL 33134 US

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

VADELL, GUILLERMO  
7220 SW 12 ST  
MIAMI, FL 33144 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: GUILLERMO VADELL

04/16/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: VADELL, GUILLERMO  
Address: 7220 SW 12 ST  
City-St-Zip: MIAMI, FL 33144 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: GUILLERMO VADELL

MGRM

04/16/2011

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