

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061373

Entity Name: CASA FAMILIAR, LLC

FILED  
Jan 13, 2009  
Secretary of State

## Current Principal Place of Business:

4900 NORTH OCEAN BLVD.  
APTO.1011  
FORT LAUDERDALE, FL 33308

## New Principal Place of Business:

## Current Mailing Address:

5805 BLUE LAGOON DR  
STE 200  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 74-3261514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AG CORPORATE SERVICES, LLC  
5805 BLUE LAGOON DR  
STE 200  
MIAMI, FL 33126 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: MGR ( ) Delete  
Name: FAJARDO, LUIS MIGUEL  
Address: 4900 NORTH OCEAN BLVD. APT.1011  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR ( ) Delete  
Name: TRIANA, MARIA LUISA  
Address: 4900 NORTH OCEAN BLVD. APT.1011  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR ( ) Delete  
Name: FAJARDO, CAROLINA  
Address: 4900 NORTH OCEAN BLVD. APT.1011  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR ( ) Delete  
Name: FAJARDO, FRANCISCO  
Address: 4900 NORTH OCEAN BLVD. APT.1011  
City-St-Zip: FORT LAUDERDALE, FL 33308

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: LUIS MIGUEL FAJARDO

MGR

01/13/2009

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