

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061373

FILED
Feb 15, 2012
Secretary of State

Entity Name: CASA FAMILIAR, LLC

Current Principal Place of Business:

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

New Principal Place of Business:

4900 NORTH OCEAN BLVD.
APTO.1417
FORT LAUDERDALE, FL 33308

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
Name: FAJARDO, LUIS MIGUEL
Address: 4900 NORTH OCEAN BLVD. APT 1417
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR
Name: FAJARDO, MARIA LUISA
Address: 4900 NORTH OCEAN BLVD. APT.1417
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR
Name: FAJARDO, CAROLINA
Address: 4900 NORTH OCEAN BLVD. APT.1417
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR
Name: FAJARDO, FRANCISCO
Address: 4900 NORTH OCEAN BLVD. APT.1417
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR
Name: FAJARDO, ALVARO
Address: 4900 NORTH OCEAN BLVD. APT.1417
City-St-Zip: FORT LAUDERDALE, FL 33308

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: LUIS MIGUEL FAJARDO

P/D

02/15/2012

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