

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000072338

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** BUENA SUERTE, LLC

**Current Principal Place of Business:**

9639 N. ARMENIA AVENUE  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

16017 N. FLORIDA AVENUE  
101  
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number:** 26-3065816

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BONANNO, ROBERT H ESQ.  
16017 N. FLORIDA AVENUE  
101  
LUTZ, FL 33549 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:** MGRM  
**Name:** ARTHUR, GARY K M.D.  
**Address:** 722 W. DR. MARTIN LUTHER KING BLVD  
**City-St-Zip:** TAMPA, FL 33603

**Title:** MGRM  
**Name:** BONANNO, ROBERT H ESQ.  
**Address:** 16017 N. FLORIDA AVENUE, SUITE 101  
**City-St-Zip:** LUTZ, FL 33549

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:** ROBERT H. BONANNO

MGRM

04/18/2012

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