

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000108823

FILED  
Mar 21, 2011  
Secretary of State

Entity Name: SILVAITALY, LLC

**Current Principal Place of Business:**

5653 VIA DE LA PLATA CIRCLE  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

5550 GLADES ROAD, SUITE 200  
BOCA RATON, FL 33431

**Current Mailing Address:**

5653 VIA DE LA PLATA CIRCLE  
DELRAY BEACH, FL 33484

**New Mailing Address:**

5550 GLADES ROAD, SUITE 200  
BOCA RATON, FL 33431

FEI Number: 26-3777294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATE MAINTENANCE SERVICES, LLC  
1000 BRICKELL AVENUE, SUITE 215  
MIAMI, FL 33131 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: MPS  
Name: PICO, JAIRO  
Address: 5550 GLADES ROAD, SUITE 200  
City-St-Zip: BOCA RATON, FL 33431

Title: VP  
Name: PICO, MARCELA  
Address: 5550 GLADES ROAD, SUITE 200  
City-St-Zip: BOCA RATON, FL 33431

Title: VP  
Name: PICO, ELIZABETH  
Address: 5550 GLADES ROAD, SUITE 200  
City-St-Zip: BOCA RATON, FL 33431

Title: VP  
Name: PICO, MARIA CAROLINA  
Address: 5550 GLADES ROAD, SUITE 200  
City-St-Zip: BOCA RATON, FL 33431

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: JAIRO PICO

MPS

03/21/2011

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