

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000024425

**FILED**  
**Aug 04, 2010**  
**Secretary of State**

**Entity Name:** BONILLA SANTOS FAMILY COMPANY, LLC

**Current Principal Place of Business:**

700 CURTISS PARKWAY  
MIAMI SPRINGS, FL 33166 FL

**New Principal Place of Business:**

**Current Mailing Address:**

700 CURTISS PARKWAY  
MIAMI SPRINGS, FL 33166 FL

**New Mailing Address:**

**FEI Number:** 26-4457360

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANTOS, GUILLERMO M.D.  
327 GOLDEN BEACH DRIVE  
GOLDEN BEACH, FL 33160 US

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

SANTOS, GUILLERMO D.O.  
700 CURTISS PARKWAY  
MIAMI SPRINGS, FL 33166 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 SANTOS, D.O.

08/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BONILLA, ROSELYN M.D.  
Address: 700 CURTISS PARKWAY  
City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: MGRM  
Name: SANTOS, GUILLERMO D.O.  
Address: 700 CURTISS PARKWAY  
City-St-Zip: MIAMI SPRINGS, FL 33166 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: ROSELYN BONILLA, M.D.

MGRM

08/04/2010

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