

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000062066

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CHRISTAOL TECNICOS ASESORES, LLC

**Current Principal Place of Business:**

7339 NW 54TH ST  
PMB 36902  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

7339 NW 54TH ST  
PMB 36902  
MIAMI, FL 33166

**New Mailing Address:**

5805 BLUE LAGOON DR  
300  
MIAMI, FL 33126

FEI Number: 27-0531040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

L & J MANAGEMENT CORP  
5805 BLUE LAGOON DR STE 300  
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: MGRM  
Name: DE LOS SANTOS, TABARE  
Address: 7339 NW 54TH ST  
City-St-Zip: MIAMI, FL 33166 US

Title: MGRM  
Name: FIALLO, OLIVER  
Address: 7339 NW 54TH ST  
City-St-Zip: MIAMI, FL 33166 US

Title: MGRM  
Name: PEREZ, CHRISTIAN  
Address: 7339 NW 54TH STREET  
City-St-Zip: MIAMI, FL 33166

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: TABARE DE LOS SANTOS

MGRM

04/30/2012

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