

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000066142

FILED  
Mar 22, 2011  
Secretary of State

Entity Name: FIVE WALNUT LLC

**Current Principal Place of Business:**

318 INDIAN TRACE  
# 297  
WESTON, FL 33326 US

**New Principal Place of Business:**

**Current Mailing Address:**

318 INDIAN TRACE  
# 297  
WESTON, FL 33326 US

**New Mailing Address:**

FEI Number: 27-1865074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PIEDRA, AURELIO  
9100 SOUTH DADELAND BLVD STE 912  
MIAMI, FL 33156 US

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

PIEDRA & COMPANY CPA PA  
9100 SOUTH DADELAND BLVD STE 912  
MIAMI, FL 33156 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: AURELIO A PIEDRA

03/22/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ZAMBIANCHI, ALFREDO  
Address: 318 INDIAN TRACE #297  
City-St-Zip: WESTON, FL 33326

Title: MGRM  
Name: ORTIZ DE ELGUEA, ELOISA  
Address: 318 INDIAN TRACE #297  
City-St-Zip: WESTON, FL 33326 US

Title: MGRM  
Name: ZAMBIANCHI, MARIELA  
Address: 318 INDIAN TRACE #297  
City-St-Zip: WESTON, FL 33326 US

Title: MGRM  
Name: ZAMBIANCHI, ALEJANDRO  
Address: 318 INDIAN TRACE #297  
City-St-Zip: WESTON, FL 33326 US

Title: MGRM  
Name: ZAMBIANCHI, NATALIA  
Address: 318 INDIAN TRACE #297  
City-St-Zip: WESTON, FL 33326 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: ALFREDO ZAMBIANCHI

MGRM

03/22/2011

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