

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000093954

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Entity Name:** JADE VALUES, LLC

**Current Principal Place of Business:**

2 ALHAMBRA PLAZA  
SUITE 801  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

250 BIRD ROAD  
SUITE 312  
CORAL GABLES, FL 33146 US

**Current Mailing Address:**

2 ALHAMBRA PLAZA  
SUITE 801  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

5875 COLLINS AVENUE  
APT. 1408  
MIAMI BEACH, FL 33140 US

FEI Number: 27-1332331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARIETTA MAINIERI, P.A.  
2 ALHAMBRA PLAZA  
SUITE 801  
CORAL GABLES, FL 33134 US

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

ANGEL M. GARCIA-OLIVER, P.A.  
250 BIRD ROAD  
SUITE 312  
CORAL GABLES, FL 33146 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: ANGEL M GARCIA-OLIVER

03/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: QUIROZ, JULIO COLLADO  
Address: 250 BIRD ROAD, STE. 312  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: T  
Name: GUARDIA, JAIRO  
Address: 250 BIRD ROAD, STE. 312  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: S  
Name: MENDOZA, CARLOS  
Address: 250 BIRD ROAD, STE. 312  
City-St-Zip: CORAL GABLES, FL 33146 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: JULIO COLLADO QUIROZ

P

03/28/2011

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