

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000099641

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** STATE GROUP, LLC

**Current Principal Place of Business:**

1220 WASHINGTON AVE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1220 WASHINGTON AVE  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 27-1125993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WYTRYKUSZ, FERNANDO  
9601 NW 12 STREET  
MIAMI, FL 33172 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:** MONTI, OSCAR  
**Address:** 1220 WASHINGTON AVE  
**City-St-Zip:** MIAMI BEACH, FL 33139

**Title:** MGRM  
**Name:** BAEZ, MARIA E  
**Address:** LAVELLE 887 2500 CANADA DE GOMEZ  
**City-St-Zip:** SANTA FE,

**Title:** MGRM  
**Name:** MONTI, ANDRES  
**Address:** LAVELLE 887 2500 CANADA DE GOMEZ  
**City-St-Zip:** SANTA FE,

**Title:** MGRM  
**Name:** MONTI, MARILINA  
**Address:** LAVELLE 887 2500 CANADA DE GOMEZ  
**City-St-Zip:** SANTA FE,

**Title:** MGRM  
**Name:** MONTI, DANILO  
**Address:** LAVELLE 887 2500 CANADA DE GOMEZ  
**City-St-Zip:** SANTA FE,

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:** OSCAR MONTI

MGRM

04/22/2010

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