

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000106202

Entity Name: INVERSIONES SOFIA, LLC

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3648 SW 112 AV  
MIAMI, FL 33165

**New Principal Place of Business:**

8260 W FLAGLER ST STE 2-C  
MIAMI, FL 33144

**Current Mailing Address:**

4823 SW 8 ST  
GRANADA PLAZA  
MIAMI, FL 33134

**New Mailing Address:**

8260 W FLAGLER ST STE 2-C  
MIAMI, FL 33144

FEI Number: 46-0523808

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALAS PORRAS, ONELYMAR  
3648 SW 112 AVE  
MIAMI, FL 33165 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: SALAS PORRAS, ONELYMAR  
Address: 3648 SW 112 AVE  
City-St-Zip: MIAMI, FL 33165

Title: MGRM  
Name: SALAS PORRAS, MARIELA D  
Address: 3648 SW 112 AVE  
City-St-Zip: MIAMI, FL 33165

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: SALAS ONELYMAR

MGRM

04/26/2012

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