

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000113527

FILED  
Jan 19, 2012  
Secretary of State

Entity Name: CRANDON INVESTMENTS, LLC

## Current Principal Place of Business:

2600 S DOUGLAS RD  
PH-6  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

2600 S DOUGLAS RD  
PH-6  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 42-1769672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PADIAL, JOSE I  
2600 S DOUGLAS RD  
PH-6  
CORAL GABLES, FL 33134 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: MGR  
Name: ARRIOLA, MARIA DEL R  
Address: 2600 S DOUGLAS RD PH-6  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR  
Name: ARRIOLA, MARIA TERESA  
Address: 2600 S DOUGLAS RD PH-6  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR  
Name: ARRIOLA, JOSE MIGUEL  
Address: 2600 S DOUGLAS RD PH-6  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR  
Name: ARRIOLA, ANA LUISA  
Address: 2600 S DOUGLAS RD PH-6  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR  
Name: ARRIOLA, MARIA MERCEDES  
Address: 2600 S DOUGLAS RD PH-6  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR  
Name: ARRIOLA, CARLOS ENRIQUE  
Address: 2600 S DOUGLAS RD PH-6  
City-St-Zip: CORAL GABLES, FL 33134 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: MARIA DEL ROSARIO ARRIOLA

MGR

01/19/2012

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