

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000118582

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: HABITAT HOLDING GROUP LLC

## Current Principal Place of Business:

1701 SW 2ND AVE  
PH2  
MIAMI, FL 33129 US

## New Principal Place of Business:

## Current Mailing Address:

1701 SW 2ND AVE  
PH2  
MIAMI, FL 33129 US

## New Mailing Address:

791 CRANDON BLVD., # 1102  
KEY BISCAVNE, FL 33149 US

FEI Number: 27-1931892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VANEGAS, SANTIAGO  
1701 SW 2ND AVE  
PH2  
MIAMI, FL 33129 US

## Name and Address of New Registered Agent:

PARLADE, ALBERTO J ESQ  
7050 SW 86 AVE  
MIAMI, FL 33143 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: ALBERTO J. PARLADE, ESQ.

04/30/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: ELIAS, FRANCISCO  
Address: 791 CRANDON BLVD., # 1102  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR  
Name: SALDIVIA DE ELIAS, BEATRIZ  
Address: 791 CRANDON BLVD., # 1102  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR  
Name: ELIAS, MARIA BEATRIZ  
Address: 791 CRANDON BLVD., # 1102  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR  
Name: ELIAS, MARIA LAURA  
Address: 791 CRANDON BLVD., # 1102  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: MGR  
Name: ELIAS, FRANCISCO JOSE  
Address: 791 CRANDON BLVD., # 1102  
City-St-Zip: KEY BISCAVNE, FL 33149 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: FRANCISCO ELIAS

MGR

04/30/2012

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