

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000002063

FILED  
Mar 01, 2012  
Secretary of State

Entity Name: ATLANTIC 1905, LLC

**Current Principal Place of Business:**

21050 POINT PL  
APT 1905  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

21050 POINT PL  
APT 1905  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 47-1769931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAKA, JOSEPH L  
200 S BISCAYNE BLVD  
FL 6  
MIAMI, FL 33131 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: ROIZENTAL, GUILLERMO  
Address: 21050 POINT PL APT 1905  
City-St-Zip: AVENTURA, FL 33180

Title: MGR  
Name: ROIZENTAL, ESTER  
Address: 21050 POINT PL APT 1905  
City-St-Zip: AVENTURA, FL 33180

Title: MGR  
Name: ROIZENTAL, BERNARDO  
Address: 21050 POINT PL APT 1905  
City-St-Zip: AVENTURA, FL 33180

Title: MGR  
Name: ROIZENTAL, MOISES  
Address: 21050 POINT PL APT 1905  
City-St-Zip: AVENTURA, FL 33180

Title: MGR  
Name: ROIZENTAL, RICARDO  
Address: 21050 POINT PL APT 1905  
City-St-Zip: AVENTURA, FL 33180

Title: MGR  
Name: ROIZENTAL, ROBERTO  
Address: 21050 POINT PL APT 1905  
City-St-Zip: AVENTURA, FL 33180

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: BERNARDO ROIZENTAL

MGR

03/01/2012

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