

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000040048

Entity Name: COQUI (USA) #2, LLC

FILED
Apr 21, 2011
Secretary of State

Current Principal Place of Business:

% ERNESTO SANCHEZ, P.A.
1313 PONCE DE LEON BLVD., STE. 301
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

% ERNESTO SANCHEZ, P.A.
1313 PONCE DE LEON BLVD., STE. 301
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SANCHEZ, ERNESTO PA
1313 PONCE DE LEON BLVD., STE. 301
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: MANTELLINI, PEDRO J
Address: 1313 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR
Name: MANTELLINI, NERIDA P
Address: 1313 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR
Name: MANTELLINI, TRIANA M
Address: 1313 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR
Name: MANTELLINI, DAVID D
Address: 1313 PONCE DE LEON BLVD., STE. 301
City-St-Zip: CORAL GABLES, FL 33134

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: PEDRO MANTELLINI

MGR

04/21/2011

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