

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000043365

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** 1791 SW NEWPORT ISLES, LLC

**Current Principal Place of Business:**

2700 GLADES CIRCLE  
#104  
WESTON, FL 33327 US

**New Principal Place of Business:**

**Current Mailing Address:**

2700 GLADES CIRCLE  
#104  
WESTON, FL 33327 US

**New Mailing Address:**

**FEI Number:** 27-4341276

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANUEL DINER, P.A.  
7735 NW 146 STREET  
SUITE 300  
MIAMI, FL 33016 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:** SOARES, HUMBERTO  
**Address:** 2700 GLADES CIRCLE #104  
**City-St-Zip:** WESTON, FL 33327 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:** HUMBERTO SOARES

MGRM

02/17/2011

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