

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000059066

Entity Name: GAB INVERSIONES, LLC

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1395 BRICKELL AVE  
690  
MIAMI, FL 33131

**New Principal Place of Business:**

7471 NW 116 AVENUE  
DORAL, FL 33178

**Current Mailing Address:**

16528 SW 99TH STREET  
MIAMI, FL 33196

**New Mailing Address:**

7471 NW 116 AVENUE  
DORAL, FL 33178

FEI Number: 80-0698541

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRUJILLO, MARIANELLA  
110 WASHINGTON AVE  
1512  
MIAMI BEACH, FL 33139 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: BERNAL, GUSTAVO A SR.  
Address: 7471 NW 116 AVENUE  
City-St-Zip: DORAL, FL 33178

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: SR GUSTAVO A BERNAL

MGRM

04/24/2012

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