

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000081226

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** HERIMAI LABORATORIES, L.L.C.

**Current Principal Place of Business:**

9365 FONTAINBLEAU BLVD  
SUITE E-224  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

9365 FONTAINBLEAU BLVD  
SUITE E-224  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 27-3168582      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SILVESTRI, CLAUDIO  
9365 FONTAINBLEAU BLVD  
SUITE E-224  
MIAMI, FL 33172 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:** SILVESTRI GIBERTINI, RAUL  
**Address:** 9365 FONTAINBLEAU BLVD, SUITE E-224  
**City-St-Zip:** MIAMI, FL 33172

**Title:** MGRM  
**Name:** SILVESTRI STOPPA, CLAUDIO A  
**Address:** 9365 FONTAINBLEAU BLVD, SUITE E-224  
**City-St-Zip:** MIAMI, FL 33172

**Title:** MGRM  
**Name:** LEAL CHANTADA, MIGUEL ANGEL  
**Address:** 9365 FONTAINBLEAU BLVD, SUITE E-224  
**City-St-Zip:** MIAMI, FL 33172

**Title:** MGR  
**Name:** SILVESTRI STOPPA, PAOLA A  
**Address:** 9365 FONTAINBLEAU BLVD, SUITE E-224  
**City-St-Zip:** MIAMI, FL 33172

**Title:** MGR  
**Name:** LOPEZ YEPEZ, ANNILIZ M  
**Address:** 9365 FONTAINBLEAU BLVD, SUITE E-224  
**City-St-Zip:** MIAMI, FL 33172

**Title:** MGR  
**Name:** VISCARRONDO AGUERO, ROSEMARY C  
**Address:** 9365 FONTAINBLEAU BLVD, SUITE E-224  
**City-St-Zip:** MIAMI, FL 33172

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: PAOLA A. SILVESTRI STOPPA

MGR

04/19/2011

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