

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000099416

Entity Name: HINVESTALE LLC

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

20225 NE 34TH CT  
516  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

20225 NE 34TH CT  
516  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 27-3522022

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FALLICA, GIUSEPPE  
20225 NE 34TH CT  
516  
AVENTURA, FL 33180 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: FALLICA, GIUSEPPE  
Address: 20225 NE 34 CT APT 516  
City-St-Zip: AVENTURA, FL 33180

Title: MGR  
Name: POLITI, PIETRO  
Address: 20225 NE 34TH CT, APT 516  
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: GIUSEPPE FALLICA

MGR

02/02/2012

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