

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000112863

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Entity Name:** INVERSIONES ARAKI, C.A. , LLC

**Current Principal Place of Business:**

2051 NW 112TH AVENUE, SUITE 114  
MIAMI, FL 33172

**New Principal Place of Business:**

2051 NW 112TH AVENUE, SUITE 114  
MIAMI  
MIAMI, FL 33172 UN

**Current Mailing Address:**

2051 NW 112TH AVENUE, SUITE 114  
MIAMI, FL 33172

**New Mailing Address:**

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

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

CABANAS & ASSOCIATES, P.A.  
10520 N.W. 26TH STREET, SUITE C-201  
DORAL, 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: PADRON, ORLANDO  
Address: 2051 NW 112TH AVENUE, SUITE 114  
City-St-Zip: MIAMI, FL 33172

Title: MGRM  
Name: CONTRERAS, HENRY  
Address: 1825 NW 112TH AVENUE, SUITE 157  
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: ORLANDO PADRON

MGR

06/12/2012

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