

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000125169

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** FARMACOS VENENCERES, L.L.C.

**Current Principal Place of Business:**

1401 PONCE DE LEON BLVD.  
SUITE 202  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

900 BISCAYNE BOULEVARD  
UNIT 3612  
MIAMI, FL 33132

**Current Mailing Address:**

1401 PONCE DE LEON BLVD.  
SUITE 202  
CORAL GABLES, FL 33134

**New Mailing Address:**

900 BISCAYNE BOULEVARD  
UNIT 3612  
MIAMI, FL 33132

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLANCO, JORGE E ESQ.  
1401 PONCE DE LEON BLVD.  
SUITE 202  
CORAL GABLES, FL 33134 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: ORTEGA GONZALEZ, MIGUEL A  
Address: 900 BISCAYNE BLVD., UNIT 3612  
City-St-Zip: MIAMI, FL 33132

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: MIGUEL ORTEGA GONZALEZ

MGR

03/14/2012

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