

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128959

Entity Name: INVERSIONES BANUS CA, LLC

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9751 E BAY HARBOUR DRIVE  
BAY HARBOUR ISLANDS, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

9751 E BAY HARBOUR DRIVE  
BAY HARBOUR ISLANDS, FL 33154

**New Mailing Address:**

FEI Number: 27-4327357

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CABANAS, JOSEPH F  
CABANAS & ASSOCIATES, P.A.  
10520 NW 26TH STREET, SUITE C-201  
DORAL, FL 33172 US

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

CABANAS & ASSOCIATES, P.A.  
10520 NW 26TH STREET  
SUITE C-201  
DORAL, FL 33172 US

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: JOSEPH F. CABANAS

03/01/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GRIJALBA, ARAMIS  
Address: 9751 E BAY HARBOUR DRIVE  
City-St-Zip: BAY HARBOUR ISLANDS, FL 33154

Title: MGRM  
Name: GRIJALBA, ANA M  
Address: 9751 E BAY HARBOUR DRIVE  
City-St-Zip: BAY HARBOUR ISLANDS, FL 33154

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: ARAMIS GRIJALBA

MGRM

03/01/2011

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