

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000018822

Entity Name: LTL ITALIAN DESIGN, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10 ARAGON AVENUE  
SUITE 1220  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

10 ARAGON AVENUE  
SUITE 1220  
CORAL GABLES, FL 33134

**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:**

NS CORPORATE SERVICES, INC.  
1110 BRICKELL AVENUE  
SUITE 310  
MIAMI, FL 33131 US

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

OCARIZ, GARRASTACHO, HEVIA & MERCER, LLLP  
999 PONCE DE LEON BLVD.  
650  
CORAL GABLES, FL 33134 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: MARIA DEL CALVO

01/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ANNESE PAEZ, LUIGI T  
Address: 10 ARAGON AVENUE, SUITE 1220  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: ANNESE PAEZ, TOMMASO A  
Address: 10 ARAGON AVENUE, SUITE 1220  
City-St-Zip: CORAL GABLES, FL 33134

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: LUIGI ANNESE

MGRM

01/05/2012

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