

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000066232

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** PRATMASS, LLC

**Current Principal Place of Business:**

2000 PONCE DE LEON BLVD  
651  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2000 PONCE DE LEON BLVD  
651  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 32-0348203

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LCP TAX & ACCOUNTING, LLC  
5615 NW 112TH PATH  
DORAL, FL 33178 US

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

Y&Y BUSINESS CONSULTANTS LLC  
149 NE 89 STREET  
MIAMI, FL 33138 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:** STEFANIE SCHRADER

04/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MASSIANI, JONATHAN  
**Address:** 2000 PONCE DE LEON BLVD, SUITE 651  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** MGR  
**Name:** PRATO, CARLOS F  
**Address:** 2000 PONCE DE LEON BLVD  
**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:** JONATHAN MASSIANI

MGRM

04/28/2012

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