

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000078043

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** CESPEDES LAW FIRM, LLC

**Current Principal Place of Business:**

5970 S.W. 18 STREET  
SUITE 117  
BOCA RATON, FL 33433

**New Principal Place of Business:**

113 ALMERIA AVENUE  
2ND FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

5970 S.W. 18 STREET  
SUITE 117  
BOCA RATON, FL 33433

**New Mailing Address:**

113 ALMERIA AVENUE  
2ND FLOOR  
CORAL GABLES, FL 33134

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CESPEDES, ERNESTO F JR  
5970 S.W. 18 STREET  
SUITE 117  
BOCA RATON, FL 33433 US

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

CESPEDES, CARLOS A  
113 ALMERIA AVENUE  
2ND FLOOR  
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: CARLOS A. CESPEDES, ESQ.

04/11/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CESPEDES, CARLOS A  
Address: 113 ALMERIA AVENUE - 2ND FLOOR  
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: CARLOS A. CESPEDES, ESQ.

MGRM

04/11/2012

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