

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000142727

Entity Name: ALMA TRUST, LLC

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

**Current Principal Place of Business:**

20801 BISCAYNE BLVD.  
SUITE 403  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

20801 BISCAYNE BLVD.  
SUITE 403  
AVENTURA, FL 33180

**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:**

GBS CONSULTANTS, INC.  
18501 PINES BLVD.  
SUITE 201  
PEMBROKE PINES, FL 33029 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: GUTT, ALVARO  
Address: CALLE LOS JARDINES, EDIF. EXCELSIOR PLAZA  
City-St-Zip: CARACAS, VENEZUELA,

Title: MGR  
Name: GRAUER, MARY  
Address: CALLE LOS JARDINES, EDIF. EXCELSIOR PLAZA  
City-St-Zip: CARACAS, VENEZUELA,

Title: MGR  
Name: GUTT, VIVIAN R  
Address: CALLE LOS JARDINES, EDIF. EXCELSIOR PLAZA  
City-St-Zip: CARACAS, VENEZUELA,

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: ALVARO GUTT

MR

03/11/2012

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