

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001738

Entity Name: MAPALE LLC

FILED
Apr 11, 2012
Secretary of State

Current Principal Place of Business:

7321 N.W. 75TH STREET
MIAMI, FL 33166

New Principal Place of Business:

1800 N.W. 94TH AVENUE
DORAL, FL 33172 US

Current Mailing Address:

7321 N.W. 75TH STREET
MIAMI, FL 33166

New Mailing Address:

1800 N.W. 94TH AVENUE
DORAL, FL 33172 US

FEI Number: 20-3828091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: SMGR
Name: SANTO DOMINGO, ALEJANDRO P
Address: 499 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: SMGR
Name: SANTO DOMINGO, ANDRES
Address: 499 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: SMGR
Name: SANTO DOMINGO R, JULIO MARIO
Address: 499 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: SMGR
Name: FONSECA, ROSA EMILIA VP
Address: 499 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: SMGR
Name: HAMSHAW, ROBERT K
Address: 499 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: VP
Name: PEREZ, CARLOS A VP
Address: 499 PARK AVENUE, 24TH FLOOR
City-St-Zip: NEW YORK, NY 10022

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: /S/ALEJANDRO SANTO DOMINGO/

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04/11/2012

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