

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070751

FILED
Apr 30, 2012
Secretary of State

Entity Name: SALES - BUY TOUCH, LLC

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-1702792 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134 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: MGRM
Name: MAREYNA-MARCOVICH, ARTURO
Address: 1786 CLOVER TREE CT.
City-St-Zip: CHULA VISTA, CA 91913

Title: MGRM
Name: QUIROZ, MANUEL J
Address: PESTALOZZI NO. 858 COL. NARAVARTE C.P.
City-St-Zip: MEXICO CITY, MEXICO, XX XX XX

Title: MGRM
Name: LLANOS, JUAN C
Address: PESTALOZZI NO. 858 COL. NARAVARTE C.P.
City-St-Zip: MEXICO CITY, MEXICO, XX XX XX

Title: MGRM
Name: LLANOS, JOSE E
Address: PESTALOZZI NO. 858, COL. NARAVARTE C.P.
City-St-Zip: MEXICO CITY, MEXICO, XX XX XX

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: ARTURO MAREYNA MARCOVICH

MGRM

04/30/2012

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