

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000018477

**Entity Name:** LAMCI, LLC

**Current Principal Place of Business:**

1651 SO. LEJEUNE RD.  
MIAMI, FL 33134

**Current Mailing Address:**

1651 SO. LEJEUNE RD.  
MIAMI, FL 33134

**FEI Number:** 56-2292959

**Certificate of Status Desired:** No

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

DE SOCARRAZ, ELENA  
1651 SO. LEJEUNE ROAD  
MIAMI, 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name DE SOCARRAZ, ELENA  
Address 1651 SO. LEJEUNE RD.  
City-State-Zip: MIAMI FL 33134

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELENA DE SOCARRAZ

MANAGER

04/30/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date