

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031507

Entity Name: 801 MONTEREY, L.L.C.

Current Principal Place of Business:

801 MONTEREY ST.
CORAL GABLES, FL 33134

Current Mailing Address:

901 PONCE DE LEON BLVD.
SUITE 502
CORAL GABLES, FL 33134

FEI Number: 47-0927595

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEREZ-ABREU, JAVIER
901 PONCE DE LEON BLVD.
SUITE 502
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name DE GOYTISOLO, AGUSTIN G
Address 8755 SCHOOL HOUSE ROAD
City-State-Zip: MIAMI FL 33143

Title MGRM
Name PEREZ-ABREU, DULCE
Address 901 PONCE DE LEON BLVD #502
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name PEREZ-ABREU, JAVIER
Address 901 PONCE DE LEON BLVD #502
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name MARTIN-LAVIELLE, ANA
Address 901 PONCE DE LEON BLVD #502
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name PUJALS, VICTOR
Address 901 PONCE DE LEON BLVD #502
City-State-Zip: CORAL GABLES 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAVIER PEREZ-ABREU

MANAGING MEMBER

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date