

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000002301

**Entity Name:** SOCARRAS & ASSOCIATES LLC

**Current Principal Place of Business:**

250 CATALONIA AVENUE  
SUITE 504  
CORAL GABLES, FL 33134

**Current Mailing Address:**

6235 SW 113TH STREET  
PINECREST, FL 33156

**FEI Number:** 20-4077242

**Certificate of Status Desired:** No

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

SOCARRAS, FRANK O CPA  
6235 SW 113TH STREET  
PINECREST, FL 33156 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:** FRANK O SOCARRAS, CPA

03/11/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FRANK O SOCARRAS, P.A.  
Address 6235 SW 113TH STREET  
City-State-Zip: PINECREST FL 33156

*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:** FRANK O SOCARRAS PA

MGRM

03/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date