

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000077233

**Entity Name:** PREMIER RISK MANAGEMENT, LLC

**Current Principal Place of Business:**

5835 BLUE LAGOON DRIVE  
SUITE 400  
MIAMI, FL 33126

**Current Mailing Address:**

PO BOX 260546  
MIAMI, FL 33126

**FEI Number:** 27-1353804

**Certificate of Status Desired:** No

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

CEJAS, PABLO L  
5835 BLUE LAGOON DRIVE  
SUITE 400  
MIAMI, FL 33126 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:** PABLO L CEJAS

04/09/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name AQUARIUS CAPITAL, LLC  
Address PO BOX 260546  
City-State-Zip: MIAMI FL 33126-0546

*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:** PABLO L CEJAS

**REGISTERED AGENT**

04/09/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date