

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000082909

**Entity Name:** FLORBENI II LLC

**Current Principal Place of Business:**

247 SW 8TH STREET  
#894  
MIAMI, FL 33130

**FILED**  
**Mar 04, 2013**  
**Secretary of State**  
**CC4228699233**

**Current Mailing Address:**

247 SW 8TH STREET  
#894  
MIAMI, FL 33130 US

**FEI Number: APPLIED FOR**

**Certificate of Status Desired: No**

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

TONANTE, MARIA G  
247 SW 8TH STREET  
#894  
MIAMI, FL 33130 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 MGRM  
Name TONANTE, MARIA G  
Address 247 SW 8TH STREET #894  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name MASSON, WALTER B  
Address 247 SW 8TH STREET #894  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name YOOS, MIRTA G  
Address 247 SW 8TH STREET #894  
City-State-Zip: MIAMI FL 33130

*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: TONANTE MARIA G**

**MGRM**

**03/04/2013**

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

\_\_\_\_\_  
Date