

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000062101

**Entity Name:** AGROMACHINERY LLC

**Current Principal Place of Business:**

5150 NW 72 AVE  
MIAMI, FL 33166

**Current Mailing Address:**

5150 NW 72 AVE  
MIAMI, FL 33166

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

CONCHA, ZONIA  
275 SW 198 TERR  
PEMBROKE PINES, FL 33029 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 TORREALBA, ALI  
Address 5150 NW 72 AVE  
City-State-Zip: MIAMI FL 33166

Title MGR  
Name TORREALBA, ALI JR  
Address 5150 NW 72 AVE  
City-State-Zip: MIAMI FL 33166

Title MGR  
Name TORREALBA, ALTHIS  
Address 5150 NW 72 AVE  
City-State-Zip: MIAMI FL 33166

Title MGR  
Name TORREALBA, THISBETH  
Address 5150 NW 72 AVE  
City-State-Zip: MIAMI FL 33166

Title MGR  
Name BASTARDO, THISBET  
Address 5150 NW 72 AVE  
City-State-Zip: MIAMI FL 33166

*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:** ALI TORREALBA

**MANAGER**

**08/29/2013**

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

\_\_\_\_\_  
Date