

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000141680

Entity Name: ENSALUD GLOBAL TRADING , LLC**Current Principal Place of Business:**2853 EXECUTIVE PARK DRIVE
SUITE 105
WESTON, FL 33331**Current Mailing Address:**2853 EXECUTIVE PARK DRIVE
SUITE 105
WESTON, FL 33331**FEI Number: APPLIED FOR****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAS FINANCIAL GROUP, INC
2853 EXECUTIVE PARK DRIVE
SUITE 105
WESTON, FL 33331 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	LOPEZ GONZALEZ, ALBERTO J
Address	URBANIZACION SANTA INES, AV PRINCIPAL CASA
City-State-Zip:	SAN CRISTOBAL 00 00000
Title	MGRM
Name	FARMACIA SALUD GLOBAL, C.A
Address	CR 17 ENTRE CALLES 11 Y12 ESQ, CASA 11-7
City-State-Zip:	SAN CRISTOBAL 00 00000

Title	MGRM
Name	LOPEZ GONZALEZ, JOSE A
Address	URBANIZACION SANTA INES, AV PRINCIPAL CASA
City-State-Zip:	SAN CRISTOBAL 00 00000
Title	MGRM
Name	ENSALUD FARMACIA, C.A
Address	AV PRINCIPAL DE PUEBLO NUEVO CC VESNA NIVE
City-State-Zip:	SAN CRISTOBAL 00 00000

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: ALBERTO J LOPEZ GONZALEZ**MGRM****05/01/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date