

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000083604

Entity Name: AMAIZE DORAL PARK CENTER LLC

Current Principal Place of Business:

3887 NW 107 AVENUE
DORAL, FL 33178

Current Mailing Address:

3887 NW 107 AVENUE
DORAL, FL 33178 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JSH REGISTER AGENT SERVICES INC.
200 S BISCAYNE BLVD
2700
MIAMI, FL 33131 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 GINESTRA, LUIS
Address 3887 NW 107 AVENUE
City-State-Zip: DORAL FL 33178

Title MGR
Name COHEN, KAREN
Address 3887 NW 107 AVENUE
City-State-Zip: DORAL FL 33178

Title MGR
Name GARCIA, ANDRES
Address 2887 NW 107 AVENUE
City-State-Zip: DORAL FL 33178

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: LUIS GINESTRA

MANAGER

02/14/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date