

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000009217

**Entity Name:** AGUACLARA INTERNATIONAL, LLC

**Current Principal Place of Business:**

10305 NW 41 STREET  
SUITE 214  
DORAL, FL 33178

**Current Mailing Address:**

P.O. BOX 226648  
MIAMI, FL 33222

**FEI Number: 46-4562198**

**Certificate of Status Desired: No**

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

MALAVE, ANTONIO M  
10305 NW 41 STREET  
SUITE 214  
DORAL, FL 33178 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 MALAVE, ANTONIO M  
Address P.O. BOX 226648  
City-State-Zip: MIAMI FL 33222

Title AUTHORIZED MEMBER  
Name SHOCK MEDIA GROUP  
Address 10305 NW 41 STREET  
SUITE 214  
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: ANTONIO MALAVE**

**MGR**

**01/12/2017**

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

\_\_\_\_\_  
Date