

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000275

Entity Name: CENTRAL SANTA LUCIA, L.C.

Current Principal Place of Business:

1401 BRICKELL AVE.
SUITE 420
MIAMI, FL 33131

FILED
Apr 30, 2015
Secretary of State
CC4252657820

Current Mailing Address:

1401 BRICKELL AVE.
SUITE 420
MIAMI, FL 33131 US

FEI Number: 65-0849458

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUTIERREZ, NICOLAS J. JR.
1401 BRICKELL AVE.
SUITE 420
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: NICOLAS J. GUTIERREZ, JR.

04/30/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PEDROSO, VICTOR M. JR.
Address 1408 BRICKELL BAY DR.
APT. 1407
City-State-Zip: MIAMI FL 33131

Title MGR
Name ARGUELLES, FERNANDO J. JR.
Address 730 DAVIS RD.
City-State-Zip: CORAL GABLES FL 33143

Title MGR
Name SANCHEZ, ALFREDO J.
Address 112 BLOOMFIELD
City-State-Zip: WEST PALM BEACH FL 33405

Title MGR
Name FANJUL, CRISTINA
Address 1161 NORTH LAKE WORTH
City-State-Zip: PALM BEACH FL 33480

Title MGR
Name LATOUR, ANTONIO
Address 16800 GULF BLVD, APT 2
City-State-Zip: TAMPA FL 33708

Title MGR
Name GUTIERREZ, NICOLAS J. JR.
Address 1528 PALERMO AVE.
City-State-Zip: CORAL GABLES FL 33134

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: NICOLAS GUTIERREZ

MANAGER

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date