

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L96000000737

**Entity Name:** LUIS AND MARITZA VELAZQUEZ FAMILY, L.C.

**FILED**  
**Feb 18, 2014**  
**Secretary of State**  
**CC1077006496**

**Current Principal Place of Business:**

C/O LUIS A. VELAZQUEZ  
8600 SW 92ND STREET, SUITE 109  
MIAMI, FL 33156

**Current Mailing Address:**

C/O LUIS A. VELAZQUEZ  
8600 SW 92ND STREET, SUITE 109  
MIAMI, FL 33156

**FEI Number:** 65-0716056

**Certificate of Status Desired:** No

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

VELAZQUEZ, LUIS A  
7260 SW 100TH STREET  
MIAMI, FL 33156 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	Title	MGRM
Name	VELAZQUEZ, LUIS A	Name	VELAZQUEZ, VICTOR M
Address	7260 SW 100TH STREET	Address	7260 SW 100TH STREET
City-State-Zip:	MIAMI FL 33156	City-State-Zip:	MIAMI FL 33156
Title	MGRM		
Name	VELAZQUEZ, EDUARDO A		
Address	7260 SW 100TH STREET		
City-State-Zip:	MIAMI FL 33156		

*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 A. VELAZQUEZ

**MGR**

**02/18/2014**

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

\_\_\_\_\_  
Date