

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000001680

**Entity Name:** MAMBO LLC

**Current Principal Place of Business:**

1800 N.W. 94TH AVENUE  
DORAL, FL 33172

**Current Mailing Address:**

1800 N.W. 94TH AVENUE  
DORAL, FL 33172 UN

**FEI Number:** 20-3827894

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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 SMGR  
Name FONSECA, ROSA EMILIA CHRMN  
Address CANAL CARACOL CALLE 103 NO. 69B  
- 43  
City-State-Zip: BOGOTA COLOMBIA XX XXXXX

Title SMGR  
Name CALLE, LUIS  
Address CANAL CARACOL  
CALLE 103 NO. 69B-43  
City-State-Zip: BOGOTA

Title SMGR  
Name CORDOBA, GONZALO  
Address CANAL CARACOL, CALLE 103, NO.  
69B - 43  
City-State-Zip: BOGOTA, COLOMBIA XX XXXXX

Title SMGR  
Name CARDENAS, RUBEN DARIO TREAS  
Address CANAL CARACOL, CALLE 103 NO. 69B  
- 43  
City-State-Zip: BOGOTA, COLOMBIA XX XXXXX

Title GMGR  
Name MARQUEZ-STERLING, CARLOS  
Address 1800 NW 94TH AVE.  
City-State-Zip: DORAL FL 33172

*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 CALLE

**SUPERVISING MANAGER** 04/03/2017

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

\_\_\_\_\_ Date