# 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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: ELLEN OJEDA

Electronic Signature of Signing General Partner Detail

## Current Principal Place of Business:

1812 MARINER DRIVE, UNIT 139 TARPON SPRINGS, FL 34689

#### **Current Mailing Address:**

1142 HYLAN BLVD. STATEN ISLAND, NY 10305

#### FEI Number: 59-3455716

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

OJEDA, ELLEN 1812 MARINER DRIVE, UNIT 139 TARPON SPRINGS, FL 34689 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.

Electronic Signature of Registered Agent

#### General Partner Detail :

Document #P97000044081NameMANGONE ENTERPRISES, INC.Address1812 MARINER DRIVE, UNIT 139

City-State-Zip: TARPON SPRINGS FL 34689

FILED Jan 25, 2016 Secretary of State CC7515429682

Certificate of Status Desired: No

01/25/2016 Date

01/25/2016

Date

### 2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

Entity Name: MANGONE FAMILY PARTNERSHIP, LIMITED PARTNERSHIP

#### DOCUMENT# A97000001123