

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000038553

**Entity Name:** MASTRO FINANCIAL SERVICES LLC

**Current Principal Place of Business:**

100 RIALTO PLACE  
SUITE 736  
MELBOURNE, FL 32901

**Current Mailing Address:**

100 RIALTO PLACE  
SUITE 736  
MELBOURNE, FL 32901 US

**FEI Number:** 74-3125724

**Certificate of Status Desired:** No

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

MASTROSIMONE, ROBERT CFP  
100 RIALTO PLACE  
SUITE 736  
MELBOURNE, FL 32901 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 MGRM  
Name MASTROSIMONE, ROBERT CFP  
Address 100 RIALTO PLACE, SUITE 736  
City-State-Zip: MELBOURNE FL 32901

*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:** ROBERT MASTROSIMONE

**CEO**

**02/25/2014**

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

\_\_\_\_\_  
Date