

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000000551

**Entity Name:** DAFONTI NUTRIPHARM, LLC

**Current Principal Place of Business:**

1101 NW 51 STREET  
FT.LAUDERDALE, FL 33309

**Current Mailing Address:**

1101 NW 51 STREET  
FT. LAUDERDALE, FL 33309

**FEI Number:** 20-2140876

**Certificate of Status Desired:** No

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

PIEDRA & COMPANY CPA PA  
9100 S DADELAND BLVD  
STE 912  
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 MGRM  
Name RAVELO, GUSTAVO  
Address 1101 NW 51 STREET  
City-State-Zip: FT.LAUDERDALE FL 33309

*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:** GUSTAVO RAVELO

MGRM

04/15/2016

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

\_\_\_\_\_ Date