

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000101407

**Entity Name:** TEIVA LLC

**Current Principal Place of Business:**

18130 COLLINS AVE.  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

18130 COLLINS AVE.  
SUNNY ISLES, FL 33160

**FEI Number:** 20-3621763

**Certificate of Status Desired:** No

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

FREDERIC BARTHE PA  
2455 E. SUNRISE BLVD.  
SUITE 602  
FORT LAUDERDALE, FL 33304 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           | MGR                 |
| Name            | PRADO, GILLES       | Name            | GUILLARD, CORINNE   |
| Address         | 8850 DICKENS AVENUE | Address         | 8850 DICKENS AVENUE |
| City-State-Zip: | SURFSIDE FL 33154   | City-State-Zip: | SURFSIDE FL 33154   |

*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:** CORINNE GUILLARD

**OWNER**

**01/09/2017**

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

\_\_\_\_\_  
Date