

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024781

Entity Name: ST. LOUIS PLAZA, L.L.C.

Current Principal Place of Business:

4114 W. NORTH B STREET
TAMPA, FL 33609

Current Mailing Address:

P.O. BOX 271058
TAMPA, FL 33688

FEI Number: 65-1279509

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SALEM, ALBERT MJR.
4600 WEST KENNEDY BLVD.
TAMPA, FL 33609 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 GILBERTO E VEGA, TRUSTEE
Address P.O. BOX 271058
City-State-Zip: TAMPA FL 33688

Title MGRM
Name ILONA M. COYA DE VEGA, TRUSTEE
Address P.O. BOX 271058
City-State-Zip: TAMPA FL 33688

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: GEVEGAMD

ORTHOPADIC SURGEON 01/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date