

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000091800

**Entity Name:** POCAR'S REPUESTOS & ACCESORIOS LLC

**Current Principal Place of Business:**

4041 NW 25 ST  
MIAMI, FL 33142

**Current Mailing Address:**

4041 NW 25 ST  
MIAMI, FL 33142 US

**FEI Number:** 51-0602749

**Certificate of Status Desired:** No

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

CORZO, JOSE R  
4041 NW 25 ST  
MIAMI, FL 33142 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	CORZO, JOSE R	Name	CARVALHO, ALICIA N
Address	4041 NW 25 ST	Address	4041 NW 25 ST
City-State-Zip:	MIAMI FL 33142	City-State-Zip:	MIAMI FL 33142
Title	MGR	Title	MGR
Name	PINTO, SIMON M	Name	ALCALA, HILDA
Address	1521 ALTON ROAD STE. 510	Address	1521 ALTON ROAD STE. 510
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

*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:** SIMON PINTO

**MGR**

**04/14/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date