

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033701

Entity Name: ENGINEERING & SECURITY SOLUTIONS, LLC**Current Principal Place of Business:**5161 NW 79TH AV.
UNIT 1
DORAL, FL 33166**Current Mailing Address:**5161 NW 79TH AV.
UNIT 1
DORAL, FL 33166 US**FEI Number:** 20-8754215**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PADRON, OBERDAN
5161 NW 79TH AV.
UNIT 1
DORAL, FL 33166 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 CEO
Name PADRON, OBERDAN R
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

Title COO
Name CRUZ, OSCAR A
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

Title AUTHORIZED REPRESENTATIVE
Name BECERRA, JONATHAN A
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

Title AUTHORIZED MEMBER
Name MENDEZ, EMILIA D
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

Title AUTHORIZED MEMBER
Name PADRON, FABIOLA
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

Title CFO
Name MORA, CESAR A
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

Title TREASURER
Name BRUTTINI, ALESSANDRO
Address 5161 NW 79TH AV.
UNIT 1
City-State-Zip: DORAL FL 33166

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: OBERDAN R PADRON

CEO

04/17/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date