

**2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000106214

**FILED  
Aug 17, 2015  
Secretary of State  
CC9055376239**

**Entity Name:** HIGHSTYLE ENGINEERING & ARCHITECTURAL SERVICES LLC

**Current Principal Place of Business:**

5521 MAINSHIP DRIVE  
GREENACRES, FL 33463

**Current Mailing Address:**

5521 MAINSHIP DRIVE  
GREENACRES, FL 33463

**FEI Number: 26-1264765**

**Certificate of Status Desired: Yes**

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

GABOTON, JEAN-BAPTISTE C MGRM  
5521 MAINSHIP DRIVE  
GREENACRES, FL 33463 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 GABOTON, JEAN-BAPTISTE  
Address 5521 MAINSHIP DRIVE  
City-State-Zip: GREENACRES FL 33463

Title PRES  
Name ALIMBA, MICHAEL U  
Address 13876 SW 56 STREET #452  
City-State-Zip: MIAMI FL 33175

Title VP  
Name GABOTON, MARIE J  
Address 5521 MAINSHIP DRIVE  
City-State-Zip: GREENACRES FL 33463

*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: GABOTON, JEAN- BAPTISTE C**

**MGRM**

**08/17/2015**

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

\_\_\_\_\_  
Date