

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000127386

**Entity Name:** PHOENICIA VIAJES TRAVEL GROUP, LLC

**Current Principal Place of Business:**

7575 DR PHILLIPS BLVD  
SUITE 335  
ORLANDO, FL 32819

**Current Mailing Address:**

7575 DR PHILLIPS BLVD  
SUITE 335  
ORLANDO, FL 32819

**FEI Number:** 26-1689949

**Certificate of Status Desired:** No

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

WARD, TAYLOR D  
1000 LEGION PLACE  
SUITE 1200  
ORLANDO, FL 32801 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:** TAYLOR WARD

01/09/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           YORDE, SAID  
Address        7575 DR PHILLIPS BLVD, SUITE 335  
City-State-Zip: ORLANDO FL 32819

Title           MANAGER  
Name           YORDE, KARIM  
Address        7575 DR PHILLIPS BLVD, SUITE 335  
City-State-Zip: ORLANDO FL 32819

Title           MEMBER  
Name           YORDE, MIRNA  
Address        7575 DR PHILLIPS BLVD, SUITE 335  
City-State-Zip: ORLANDO FL 32819

Title           MEMBER  
Name           YORDE, NADIM  
Address        7575 DR PHILLIPS BLVD, SUITE 335  
City-State-Zip: ORLANDO FL 32819

*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:** SAID YORDE

**DIRECTOR**

01/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date