

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000038656

**Entity Name:** SERVICES AND PROMOTIONS MIAMI LLC

**Current Principal Place of Business:**

ATTN: ANTONIO COVAS OR LINDA MENDIVIL  
1401 BRICKELL AVENUE, SUITE 810  
MIAMI, FL 33131

**Current Mailing Address:**

ATTN: ANTONIO COVAS OR LINDA MENDIVIL  
1401 BRICKELL AVENUE, SUITE 810  
MIAMI, FL 33131

**FEI Number:** 33-1212727

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK, INC.  
11390 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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           MANAGER  
Name           GUITART CARMONA, JUAN ANTONIO  
Address        1401 BRICKELL AVENUE, SUITE 810  
City-State-Zip: MIAMI FL 33131

Title           MANAGER  
Name           CORREIA LEITE PORTAL COVAS ,  
                  ANTONIO JULIO  
Address        1401 BRICKELL AVENUE, SUITE 810  
City-State-Zip: MIAMI FL 33131

*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:** JUAN ANTONIO GUITART CARMONA

**MANAGER**

**01/13/2015**

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

\_\_\_\_\_  
Date