

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000063448

**Entity Name:** DOLPHIN BAIL BONDS LLC

**Current Principal Place of Business:**

521 SOUTH ANDREWS AVE.  
SUITE 05  
FT. LAUDERDALE, FL 33301

**Current Mailing Address:**

521 SOUTH ANDREWS AVE.  
SUITE 05  
FT. LAUDERDALE, FL 33301

**FEI Number:** 26-2877367

**Certificate of Status Desired:** No

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

SINGH, MIA  
1792 BELL TOWER LANE  
WESTON, FL 33326 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 THEBEAU, CLARIECE  
Address 1333 SW 18 AVE.  
City-State-Zip: FT. LAUDERDALE FL 33312

*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:** CLARIECE THEBEAU

**PRESIDENT**

**02/17/2015**

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

\_\_\_\_\_  
Date