

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109981

Entity Name: SOARES DA COSTA CONTRACTOR, LLC

Current Principal Place of Business:

6205 BLUE LAGOON DRIVE, SUITE 310
MIAMI, FL 33126

Current Mailing Address:

6205 BLUE LAGOON DRIVE, SUITE 310
MIAMI, FL 33126 US

FEI Number: 26-3805161

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MBR
Name SOARES DA COSTA AMERICA, INC.
Address 6205 BLUE LAGOON DRIVE, SUITE 310
City-State-Zip: MIAMI FL 33126

Title S
Name FAUSTINO, LUIS M
Address 6205 BLUE LAGOON DRIVE, SUITE 310
City-State-Zip: MIAMI FL 33126

Title VP
Name CRAFT, THOMAS O
Address 6205 BLUE LAGOON DRIVE, SUITE 310
City-State-Zip: MIAMI FL 33126

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: LUIS M. FAUSTINO

AUTHORIZED SIGNER

04/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date