

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000048680

**Entity Name:** SAPLANT LLC**Current Principal Place of Business:**75 VALENCIA AVENUE, SUITE 1150  
CORAL GABLES, FL 33134**Current Mailing Address:**75 VALENCIA AVENUE, SUITE 1150  
CORAL GABLES, FL 33134 US**FEI Number:** 27-0450409**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FRAGA, ALBERT J  
75 VALENCIA AVENUE, SUITE 1150  
CORAL GABLES, FL 33134 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	SAYEGH, NELSON
Address	1915 BRICKELL AVENUE, # C1001
City-State-Zip:	MIAMI FL 33129

Title	MGRM
Name	SAYEGH, FOUAD
Address	1915 BRICKELL AVENUE, #C1507
City-State-Zip:	MIAMI FL 33139

Title	MGRM
Name	SAYEGH DE DAHDAH, MAGALY
Address	1915 BRICKELL AVENUE, #C1001
City-State-Zip:	MIAMI FL 33139

Title	AUTHORIZED MEMBER
Name	SAYEGH, MICHEL
Address	75 VALENCIA AVENUE, SUITE 1150
City-State-Zip:	CORAL GABLES FL 33134

*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:** MICHEL SAYEGH

MB

03/21/2016

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