

**2017 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**

**01/10/2017**

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

\_\_\_\_\_  
Date