

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000015859

**Entity Name:** REVITAL AGENCY LLC

**Current Principal Place of Business:**

290 DR. MLK JR ST. N., SUITE 201  
ST PETERSBURG, FL 33705

**Current Mailing Address:**

290 DR. MLK JR ST. N., SUITE 201  
ST PETERSBURG, FL 33705 US

**FEI Number:** 27-1878941

**Certificate of Status Desired:** No

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

TSOURAKIS, JON  
290 DR. MLK JR ST. N., SUITE 201  
ST PETERSBURG, FL 33705 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 MGR  
Name TSOURAKIS, JON  
Address 2326 2ND AVE N  
City-State-Zip: ST PETERSBURG FL 33713

*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:** JON TSOURAKIS

**OWNER**

**01/11/2015**

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

\_\_\_\_\_  
Date