

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000051413

**Entity Name:** DE LA CRUZ PROFESIONAL SERVICES LLC

**Current Principal Place of Business:**

15165 MICHELANGELO BLVD.  
APT# 108  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

15165 MICHELANGELO BLVD  
APT# 108  
DELRAY BEACH, FL 33446 US

**FEI Number:** 30-0631728

**Certificate of Status Desired:** No

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

SAVILLE, LIZETH  
15165 MICHELANGELO BLVD  
APT # 108  
DELRAY BEACH, FL 33446 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:** LIZETH SAVILLE

04/03/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SAVILLE, LIZETH  
Address 15165 MICHELANGELO BLVD APT 108  
City-State-Zip: DELRAY BEACH FL 33446

Title MGRM  
Name DE LA CRUZ, BETTY  
Address 15165 MICHELANGELO BLVD APT 108  
City-State-Zip: DELRAY BEACH FL 33446

*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:** LIZETH SAVILLE

MANAGER

04/03/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date