

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000076946

**Entity Name:** MAISON SAINTE EDWIGE LLC

**Current Principal Place of Business:**

4232 PINE RIDGE CT  
WESTON, FL 33331

**Current Mailing Address:**

4232 PINE RIDGE CT  
WESTON, FL 33331

**FEI Number:** 27-3117623

**Certificate of Status Desired:** No

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

GBS CONSULTANTS, INC.  
3350 SW 148 AVE.  
SUITE 120  
MIRAMAR, FL 33027 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 FERNANDEZ, ANGELA J  
Address 4232 PINE RIDGE CT  
City-State-Zip: WESTON FL 33331  
  
Title MGR  
Name FERNANDEZ, JORGE E  
Address 3350 SW 148 AVE. SUITE 120  
City-State-Zip: MIRAMAR FL 33027

Title MGR  
Name FERNANDEZ, IRIS C  
Address 3350 SW 148 AVE.  
SUITE 120  
City-State-Zip: MIRAMAR FL 33027

*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:** ANGELA FERNANDEZ

MGR

03/03/2016

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

\_\_\_\_\_  
Date