

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000080642

Entity Name: SAFA BATRES LLC

Current Principal Place of Business:

5 CHIPPINGWOOD LANE
5
ORMOND BEACH, FL 32176

Current Mailing Address:

5 CHIPPINGWOOD LANE
5
ORMOND BEACH, FL 32176 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NO FRILLS ACCOUNTING LLC
906 KINGSPORT CT
HOLLY HILL, FL 32117 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 BATRES, SAFA
Address 5 CHIPPINGWOOD LANE
5
City-State-Zip: ORMOND BEACH FL 32176

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: SAFA BATRES

OWNER

03/15/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date