

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000088334

**Entity Name:** PORTO BELLAGIO 1705 LLC

**Current Principal Place of Business:**

17050 N BAY RD  
1104  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

17050 N BAY RD  
1104  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** 39-2077270

**Certificate of Status Desired:** No

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

CZETYRKO, CLAUDIA  
7660 SW 83 COURT  
MIAMI, FL 33143 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 BELMANA, ROBERTO D  
Address 17050 N BAY RD 1104  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGRM  
Name CAVALLO, MARIA G  
Address 17050 N BAY RD 1104  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** MARIA G CAVALLO

MGRM

04/29/2014

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

\_\_\_\_\_  
Date