

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000106842

**Entity Name:** VINCENT SEVEN ENTERPRISES L.L.C.

**Current Principal Place of Business:**

2223 N. WEST SHORE BLVD., UNIT B-2  
TAMPA, FL 33607

**Current Mailing Address:**

PO BOX 2705  
TAMPA, FL 33601

**FEI Number:** 27-3606834

**Certificate of Status Desired:** No

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

KNOWLES, KEVIN V  
2223 N. WEST SHORE BLVD., UNIT B-2  
TAMPA, FL 33607 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 KNOWLES, KEVIN V  
Address 2223 N. WEST SHORE BLVD., UNIT B-2  
City-State-Zip: TAMPA FL 33607

*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:** KEVIN V KNOWLES

MGR MBR

02/23/2015

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

\_\_\_\_\_  
Date