## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109339

Entity Name: ALDA EQUIPMENT & SUPPLIES, LLC

inity Name. ALDA EQUIPMENT & SUPPLIES, E

**Current Principal Place of Business:** 

4000 PONCE DE LEON BLVD

SUITE 470

CORAL GABLES, FL 33143

**Current Mailing Address:** 

FEI Number: 27-3722667

4000 PONCE DE LEON BLVD SUITE 470 CORAL GABLES, FL 33143 US

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC. 2121 PONCE DE LEON BLVD SUITE 1050 CORAL GABLES, FL 33134 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:

Address

**Electronic Signature of Registered Agent** 

Date

FILED Feb 08, 2018

**Secretary of State** 

CC6749147613

Certificate of Status Desired: No

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name MARQUEZ-BRACHO, DAPSI E Name MONTAGNE-COLMARES, ORNELLA

2121 PONCE DE LEON BLVD SUITE ANDREA

1050 Address 7540 SW 56TH CT

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: S MIAMI FL 33143

Title MGR

Name RUIZ, YORMAN ELVIS
Address 11281 NW 84TH ST
City-State-Zip: DORAL FL 33178

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: DAPSI E MARQUEZ-BRACHO

**MGRM** 

02/08/2018